

**For information
on 9 May 2011**

Legislative Council Panel on Health Services

**Issues Relating to Manpower and Wastage of Nurses
in the Hospital Authority**

PURPOSE

This paper briefs Members on the recent developments of the manpower and turnover of nurses in the Hospital Authority (“HA”) and the measures currently under consideration by HA to improve staff retention and strengthen manpower.

MEASURES FOR THE NURSING GRADE IN HA IN RECENT YEARS

2. HA highly values its healthcare professionals as the organization’s important assets, and has deployed additional resources in recent years to address manpower issues. Apart from recruiting additional healthcare staff to cope with increase in service demand, HA has made continuous efforts to enhance the professional training for staff, and to provide them with better working environment, promotion prospects and remuneration packages so as to attract and retain talents.

3. Over the years, through the re-opening of its nursing schools and increasing yearly intake of new recruits, HA has maintained steady growth in its nursing workforce. The number of nurses in HA in the past five years is at **Annex 1**. As at end of March 2011, the number of nurses in HA shows a net increase of 820 as compared with that of three years ago (the end of March 2008), representing an increase of 4.3%.

4. To attract and retain nurses, HA has in recent years introduced a number of initiatives as set out below –

(a) *Introduction of a new career progression model*

Since 2008, a new three-tier career structure has been implemented for nurses to broaden their clinical career development pathway, with the creation of Nurse Consultant posts in several clinical areas on a pilot basis. The new three-tier career structure comprises

Registered Nurse, Advanced Practice Nurse / Ward or Unit Manager and Nurse Consultant / Department Operations Manager.

(b) *Improvement in employment packages for new recruits*

The entry pay for Registered Nurse and Enrolled Nurse was raised by two pay points in 2007. In addition, since 2008, the arrangements for contract employment of new recruits of Registered Nurse have been enhanced by increasing the contract period from three years to six years (with gratuity issued every three years subject to satisfactory performance and completion of the respective contract period) to provide a more secured employment environment to facilitate continuous training and development. Contract Registered Nurses with three years or more full time service in the rank and who have met the performance criteria are eligible for application of permanent terms of employment.

(c) *Enhancement of promotion prospects*

Apart from filling all promotional vacancies, additional posts of Advance Practice Nurse have been created to meet operational needs while improving the promotion prospects of nurses. As at end of March 2011, the number of Nursing Officers (including all ranks of Nursing Officer/Ward Manager/Nurse Specialist/Advanced Practice Nurse) and above shows a net increase of 857 as compared with that at the end of March 2008. In addition, under the new career structure, a total of seven Nurse Consultants were appointed in 2008-09 in five specialties, namely, renal, diabetes, community psychiatry, wound and continence care.

(d) *Recognition of managers' contributions*

In 2008, the job title and pay packages of the then Advance Practice Nurse (Ward & Unit Management) were aligned with that of Ward Managers to recognize their managerial duties. Since 2008, a higher rate of the management responsibility allowance has also been given to Department Operations Managers working in large departments in recognition of their heavier managerial responsibilities.

(e) *Enhancement of training opportunities*

HA has all along attached great importance to the training and development of its nurses. Its Institute of Advanced Nursing Studies provides a series of structured training to nurses of different ranks to facilitate their continuous professional development. For example, since 2009-10, simulation training has been provided to new nurse graduates to strengthen their skills in clinical care and management of medical emergencies. The Institute also offers post-registration certificate courses for different specialties, with the number of such courses increasing from 12 in 2007-08 to 23 in 2010-11 to cater for the majority of nursing specialties. The number of nurses trained also increased substantially from about 400 to 1,200 during the same period. To increase nurses' international exposure, HA has launched a corporate scholarship programme since 2009-10 to sponsor Advance Practice Nurses and senior nurses to attend a 4-week overseas training. In 2009-10 and 2010-11, a total of 44 and 92 nurses received sponsorships to attend overseas training respectively.

(f) *Improvement of working conditions*

HA has also endeavoured to improve the working arrangements of nurses through various measures, including reducing the non-clinical work handled by nurses and modernizing the frequently used equipment to alleviate their workload. In 2007, a replacement plan was formulated with a target of replacing 9,000 standard hospital beds with electrically-operated beds in five years to reduce manual handling during patient ambulation. From 2008-09 to 2010-11, a total of 6,483 beds have been replaced.

TURNOVER OF HA NURSES AND MEASURES TO IMPROVE STAFF RETENTION AND STRENGTHEN WORKFORCE

5. As a result of the above improvement initiatives, the overall turnover rate of nurses in HA dropped from 4.7% in 2008-09 to 4.1% in 2009-10. Nevertheless, the overall turnover rate of nurses in HA recently increased to 5.3% in 2010-11. There are also a few specialties which have relatively high turnover rates as compared with the past few years. The turnover rates of nurses in HA by specialty in the past five years are at [Annex 2](#).

6. In view of the increasing turnover of nurses in public hospitals and

the rising service demands, HA is working out a series of measures to strengthen the workforce and improve staff retention. An additional allocation of \$200 million has been earmarked in 2011-12 for the implementation of such measures. The key short-term and medium-term measures under consideration are set out below -

Short-term measures

(a) *Strengthening of workforce to address workload demand*

To provide the necessary manpower for maintaining existing services and supporting service enhancement initiatives, HA plans to recruit about 1,720 nurses in 2011-12, covering about 90% of the available nurse graduates from universities and all graduates from HA nursing schools as well as some existing qualified nurses in the market. It is estimated that there will be a net increase of 868 nurses in 2011-12. Among them, about 300 will be deployed to rectify deficit in pressure areas.

(b) *Enhancement of proficiency of nurse graduates*

HA has been providing a preceptorship program for new nurse graduates to help them adapt to ward environment and enhance their proficiency in ward procedures. Under the program, experienced nurses are recruited part-time or given a special allowance to serve as preceptors. In 2011-12, HA plans to recruit an additional 48 preceptors to strengthen the induction training for nurse graduates and to share out the workload of existing experienced nurses in providing guidance. HA will also increase the number of training places for simulation training on emergency care to about 1,200 in 2011-12 to cover all new nurse graduates to be recruited in the year.

(c) *Enhancement of promotion opportunities*

To further enhance the promotion opportunities of nurses, HA proposes to create additional promotion posts including over 50 Nurse Consultants and 150 Advance Practice Nurse posts on top of those for normal replacements and planned new services.

(d) *Better development of nurses' talents*

(i) *Enhancement of training opportunities*

HA proposes to increase the number of overseas scholarships from 92 in 2010-11 to 115 in 2011-12 to benefit more nurses. Its Institute of Advanced Nursing Studies will also continue to provide training courses for 20 to 23 specialties to support continuous learning of nurses.

(ii) *Increased provision of training subsidy for Registered Nurses*

HA proposes to increase the amount of training subsidy to support Registered Nurses to undertake degree programmes in nursing.

(iii) *Supporting career progression of Enrolled Nurses*

To support the career progression of Enrolled Nurses, HA proposes to enhance the training sponsorship and to offer full pay salary for nurses undertaking conversion course to attain Registered Nurse qualification.

(e) *Improvement of working conditions*

(i) *Enhancement of Continuous Night Shift Scheme*

HA proposes to increase the rate of allowance for the continuous night shift scheme to provide better incentives for nurses to undertake continuous night shift duties, with a view to reducing frequent night duties of nurses to not more than once in every seven days as far as practicable.

(ii) *Improvement of working arrangements*

HA will continue to take measures to relieve nurses from non-clinical work, including enhancement of clerical support and topping up the delivery of medical consumables and supplies. In 2011-12, HA will purchase about 1,700 electrically-operated beds and other patient care/

monitoring equipment for use in ward to reduce manual handling and streamline the work processes of nurses.

(iii) *Re-prioritization of projects*

HA will review the impact of its various projects on nurses' workload, and suitably re-prioritize and adjust the pace of projects having regard to the actual manpower availability.

Medium-term measures

(a) *Review of nurses' workload and staff mix*

HA will review the reference on nursing manpower in various specialties, having regard to changes in the types of patients, acuity and complexity of diseases and development of medical technology, and make recommendations to manage the workload of nurses. In the review process, the roles and duties of care-related support workers will be further examined with a view to relieving nurses from simple and basic patient care tasks.

(b) *Creation of a positive practice environment for nurses*

The Task Force on Quality of Work-life of Nurses will continue to engage frontline nurses in studying the working conditions of nurses in different clinical specialties, with a view to formulating a rolling plan for the replacement and modernization of equipment for nursing care activities.

(c) *Improving job satisfaction of nurses*

HA will explore care delivery models and strengthen advanced and professional nursing practice in an effort to improve the job satisfaction of nurses. HA will continue to create more nurse clinics and Nurse Consultant posts to enhance the clinical career progression of nurses and further their clinical development.

Measure to increase supply of nurses in the long term

7. In the long run, we expect a substantial increase in the demand for healthcare practitioners including nurses in future. The Food and Health Bureau has recently reviewed manpower requirements for healthcare professionals and forwarded its findings to the University Grants Committee in step with its

triennial academic development planning cycle. As mentioned by the Chief Executive in his 2010-11 Policy Address, we encourage tertiary institutions to increase student places for healthcare disciplines. Meanwhile, HA nursing schools will continue to provide nurse training places to ensure continuous supply of nursing manpower.

WAY FORWARD

8. A consultation exercise is being conducted within HA on the above proposed measures. HA will engage its nurses in working out the implementation details for various improvement initiatives with a view to improving staff retention, boosting morale and strengthening manpower.

9. In the coming few years, in anticipation of the enhanced supply of nurse graduates, HA will continue to strengthen its nursing workforce to meet the increase in service demands. The total number of nurses available for appointments to HA in the coming 3 years (i.e. 2012-13 to 2014-15) is estimated to reach 1,900 to 2,000 each year, which comprises 1,550 to 1,700 new nurse graduates from universities and HA nursing schools as well as some 300 to 350 qualified nurses in the market. HA will continue to monitor the manpower situation of its nurses and make suitable arrangements in manpower planning and development to cope with service needs.

ADVICE SOUGHT

10. Members are invited to note the content of this paper.

Food and Health Bureau
Hospital Authority
May 2011

Annex 1

Nursing Workforce in HA from 2006-07 to 2010-11

Specialty	Rank	Manpower strength ¹				
		2006-07	2007-08	2008-09	2009-10	2010-11
Medicine	APN/NS/NO/WM ² or above	726	737	913	933	973
	Registered Nurse	3,110	3,085	2,989	3,012	3,122
	Enrolled Nurse / Midwife / Others	1,082	1,020	953	908	905
	Total	4,918	4,841	4,855	4,853	5,000
Obstetrics & Gynaecology	APN/NS/NO/WM ² or above	194	214	226	232	240
	Registered Nurse	765	737	749	745	723
	Enrolled Nurse / Midwife / Others	25	26	19	16	13
	Total	984	976	995	993	976
Orthopaedics & Traumatology	APN/NS/NO/WM ² or above	127	128	168	171	173
	Registered Nurse	519	509	477	481	479
	Enrolled Nurse / Midwife / Others	84	80	78	65	74
	Total	730	717	723	717	726
Paediatrics	APN/NS/NO/WM ² or above	173	186	212	219	244
	Registered Nurse	932	880	871	845	817
	Enrolled Nurse / Midwife / Others	33	46	42	39	40
	Total	1,138	1,112	1,125	1,102	1,101
Psychiatry ³	APN/NS/NO/WM ² or above	244	246	302	315	424
	Registered Nurse	714	748	767	813	1,073
	Enrolled Nurse / Midwife / Others	442	382	404	388	504
	Total	1,400	1,376	1,472	1,516	2,001
Surgery ⁴	APN/NS/NO/WM ² or above	270	266	368	374	375
	Registered Nurse	1,224	1,187	1,160	1,142	1,112
	Enrolled Nurse / Midwife / Others	187	188	196	163	157
	Total	1,682	1,641	1,725	1,679	1,644
Others	APN/NS/NO/WM ² or above	1,228	1,318	1,488	1,577	1,524
	Registered Nurse	5,539	5,694	5,526	5,810	5,713
	Enrolled Nurse / Midwife / Others	1,593	1,599	1,612	1,619	1,409
	Total	8,359	8,610	8,627	9,006	8,646
Overall	APN/NS/NO/WM ² or above	2,962	3,095	3,677	3,821	3,952
	Registered Nurse	12,803	12,839	12,540	12,848	13,040
	Enrolled Nurse / Midwife / Others	3,447	3,340	3,305	3,198	3,101
	Total	19,212	19,273	19,522	19,866	20,093

Note:

1. The above manpower figures include permanent, contract and temporary staff on full-time equivalent basis.
2. APN: Advanced Practice Nurse; NS: Nurse Specialist; NO: Nursing Officer; WM: Ward Manager
3. The services of the psychiatric department include services for mentally handicapped.
4. The specialty includes general surgery, cardiothoracic surgery and neurosurgery.

Turnover Rates of HA Nurses from 2006-07 to 2010-11

Specialty	Rank	Turnover rate ¹				
		2006-07	2007-08	2008-09	2009-10	2010-11
Medicine	APN/NS/NO/WM ² or above	2.6%	3.6%	2.4%	2.5%	2.9%
	Registered Nurse	3.2%	4.8%	5.0%	3.9%	5.4%
	Enrolled Nurse / Midwife / Others	1.8%	2.7%	4.5%	3.3%	5.0%
	Total	2.8%	4.2%	4.5%	3.5%	4.9%
Obstetric & Gynaecology	APN/NS/NO/WM ² or above	1.6%	5.2%	3.7%	2.2%	2.1%
	Registered Nurse	3.9%	6.3%	4.9%	4.1%	8.2%
	Enrolled Nurse / Midwife / Others	12.4%	4.8%	31.3%	62.6%	73.5%
	Total	3.7%	6.0%	5.0%	4.2%	7.0%
Orthopaedics & Traumatology	APN/NS/NO/WM ² or above	1.6%	1.6%	2.7%	2.9%	3.5%
	Registered Nurse	1.9%	3.1%	5.9%	2.7%	4.8%
	Enrolled Nurse / Midwife / Others	1.2%	1.3%	1.4%	1.6%	3.6%
	Total	1.8%	2.6%	4.8%	2.7%	4.4%
Paediatrics	APN/NS/NO/WM ² or above	3.9%	4.3%	4.5%	2.3%	5.8%
	Registered Nurse	5.4%	5.7%	7.4%	7.0%	9.6%
	Enrolled Nurse / Midwife / Others	3.4%	11.3%	0.0%	5.7%	9.9%
	Total	5.0%	5.7%	6.5%	6.0%	8.8%
Psychiatry ³	APN/NS/NO/WM ² or above	0.9%	1.7%	1.7%	1.4%	3.7%
	Registered Nurse	0.7%	1.6%	1.6%	2.2%	2.4%
	Enrolled Nurse / Midwife / Others	2.1%	1.6%	1.9%	2.8%	3.8%
	Total	1.2%	1.6%	1.7%	2.2%	3.1%
Surgery ⁴	APN/NS/NO/WM ² or above	1.9%	4.1%	3.6%	2.4%	2.7%
	Registered Nurse	3.6%	5.4%	6.1%	5.7%	5.0%
	Enrolled Nurse / Midwife / Others	2.2%	0.6%	4.0%	5.1%	10.8%
	Total	3.2%	4.7%	5.4%	4.9%	4.9%
Others	APN/NS/NO/WM ² or above	2.3%	2.9%	3.5%	2.7%	4.4%
	Registered Nurse	4.2%	5.6%	5.4%	5.1%	6.0%
	Enrolled Nurse / Midwife / Others	2.7%	3.5%	3.7%	3.2%	4.5%
	Total	3.6%	4.8%	4.8%	4.4%	5.5%
Overall	APN/NS/NO/WM ² or above	2.3%	3.3%	3.1%	2.4%	3.7%
	Registered Nurse	3.7%	5.1%	5.3%	4.7%	5.8%
	Enrolled Nurse / Midwife / Others	2.3%	3.0%	3.8%	3.5%	5.0%
	Total	3.2%	4.5%	4.7%	4.1%	5.3%

Note:

1. Turnover includes all types of cessation of service from HA for permanent and contract staff. Promotion, transfer and staff movements within HA are not regarded as turnover. Turnover rate is calculated as 'Total number of turnover number / Average headcount of the concerned period x 100%'
2. APN: Advanced Practice Nurse; NS: Nurse Specialist; NO: Nursing Officer; WM: Ward Manager
3. The services of the psychiatric department include services for mentally handicapped.
4. The specialty includes general surgery, cardiothoracic surgery and neurosurgery.