



# Hong Kong College of Health Service Executives

Newsletter Issue 1 2022/23

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Dr SHAM See King Arthur 岑思勁



College's website:

<http://www.hkchse.org>

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## The Challenges for Healthcare Executives in the Post-COVID Era

Educated and trained professionals taking up managerial roles and hospital administration prove to be especially vital in the success of a healthcare facility's operational efficiency, team management and business development.

Due to an aging society and unprecedented demand for health, medical and rehabilitation services, job opportunities in various healthcare occupations, especially executive posts in service coordination, quality training, project planning and client relationship are in high demand. With the impact of global pandemic, there is a changing roles for healthcare executives to be flexible, adaptative, attentive to safer service and able to re-direct resources to meet patient needs.





As professionals in medical administration, we should be insightful to opportunities in the following areas of the healthcare industry.

### **Prioritizing Infection Prevention Plans for a Safer Environment**

There is a demand that leadership in healthcare should be competent in handling difficult decision making related to the optimal control and mitigation of the impacts of any emerging and re-emerging disease. Timely and effective response to disaster such as the SARS epidemic is a hard learnt lesson in 2003. Prioritization in the face of surge capacity for various medical service should be the consolidated effort of various departments and re-evaluated at interval to leverage on changing scenarios and any opportunity for new strategies.

### **Attending to Occupational Health and Staff Wellness Programs**

This requires a multi-tiered approach that must address physical safety, just-in-time training, open communication and trusted working culture. Healthcare managers should understand the importance of mental health and staff morale and

render additional support to protect healthcare professionals. Additional workload due to “Long Covid” and the stress of longer waiting list of delayed and re-scheduled outpatient appointments, investigations, operations & etc could be addressed with PPP initiatives, creative solutions for cross-sectorial or inter-disciplinary collaboration, skill transfer and high intensity training as well as mobilization for alternative service providers.

### **Taking the Challenges of Financial Implications**

COVID-19 has altered healthcare facility costs: investment in isolation facilities, PPEs and infection control measures; additional human resources to undertake regulatory requirement for disease reporting, case tracing & outbreak investigation, precautionary tasks to protect patients, staff and visitors; use of newer drugs and health-tech, changing service delivery models due to changing health seeking behavior. All these factors induce hospital CEOs and CFOs in the pandemic recovery phase to reevaluate their organization’s routine operations and business development plan in order to alleviate further financial implication.



## Embracing Quality Service for Better Patient Experience

Telehealth is “the provision of healthcare remotely by means of telecommunications technology” such as video conferencing, telephone communications, text messaging and other modes of remote communication. Healthcare executives should take the lead in telehealth and telemedicine technology which has demonstrated its feasibility in various service delivery such as efficiency in clinic consultations with multiple specialties, real time sharing of clinical data, convenience of internet prescriptions, and cross border drug delivery, enhanced productivity in time sharing and scheduling & etc. All these new applications have greatly helped support healthcare providers and their patients amid the pandemic.

## Engaging System Transformation amidst the Healthcare Staff Shortage

COVID-19 and its ripple effects continue to pressure hospital staff and the healthcare system that desperately needs educated and trained individuals working in healthcare. Healthcare management jobs are essential as these professionals organize healthcare facilities, implement systems and manage staff to increase organizational efficiency. There will

be more awareness on personal health and hygiene living environment which demand an agile health system that can readily meet the community need by operating hospitals without walls. Also, digital health with smarter technologies and electronic database would transform the conventional professional work to a new horizon with optimal use of manpower and respective talents.

Your college has adopted a revised Health Service Competency Framework (2022) that is based on the six enabling domains and seven action domains of the *Australasian College of Health Service Management*. Details of its framework which is guiding our continuing professional development programs, can be found at the attached reference. As the pandemic wanes, our Fellows and members, holding various key managerial posts at Hong Kong health system, should have the confidence to pick up the pieces and restart important projects and operations that fell behind during the public health crisis.

### Reference:

[https://www.achsm.org.au/Portals/15/documents/education/competency-framework/2022\\_Competency\\_Framework\\_online.pdf?ver=2022-09-19-103434-260](https://www.achsm.org.au/Portals/15/documents/education/competency-framework/2022_Competency_Framework_online.pdf?ver=2022-09-19-103434-260)

Dr LIU Shao Haei  
President







## Tuen Mun District Health Centre (TMDHC) Visit

July 23, 2022

TMDHC was newly opened in May 2022. The main goal of it is promoting a healthy lifestyle for people who are living or working in Tuen Mun District.

The visit to TMDHC was a good experience and eye-opening for our College fellows and members. We were so impressed that it was equipped with lots of advanced gym facilities. With a team of professional staff, it provides health assessment, workout planning and training; so that people are aware of disease prevention and live a healthy life.

Our fellows and members were so excited to try out almost every single gym facility. It was an enjoyable and wonderful morning.

We wish the TMDHC can achieve its goal with successful provision of services.

Joyce AU





# HKCHSE Members' Night 2022



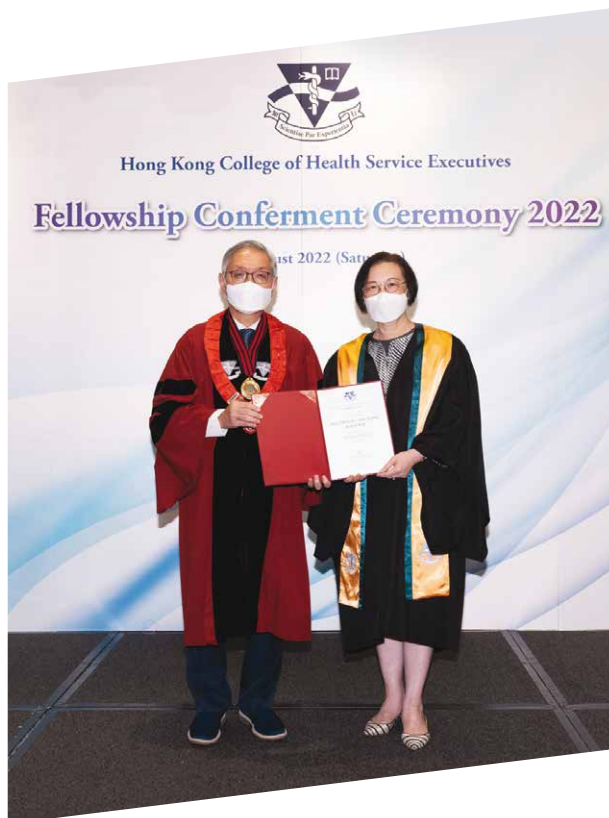








## Fellowship Conferment Ceremony 2022



2021-2022 Annual General Meeting (AGM) cum Fellowship Conferment Ceremony was held at Regal Hong Kong Hotel (Causeway Bay) and via Zoom Meeting on Saturday, 20 August 2022. The President, Dr. LIU Shao Haei, Council Members and New Fellows participated in the College Conferment Ceremony at Regal Hong Kong Hotel. Prof. CHAN, Siu Chee Sophia (newly conferred Honorary Fellow in 2021-22), JP, Former Secretary of Food and Health Bureau HKSAR, Dr. KO Wing Man, Honorary Fellow were our Guests of Honour. Prof. Peter YUEN, Advisor of HKCHSE and the Dean of College of Professional and Continuing Education (CPCE), Hong Kong Polytechnic University, Dr Ronald Lam, JP, Director of the Department of Health, Prof. LAU, Wan-Yee Joseph, Chairman, The Medical Council of Hong Kong, Prof. CHEUNG, Man-Yung Bernard, President, Federation of Medical





Societies of Hong Kong (FMSHK), Professor Hong Fung, Professor of Practice in Health Services Management at the Jockey Club School of Public Health & Primary Care (JCSPHPC), The Chinese University of Hong Kong (CUHK) cum the Executive Director and Chief Executive Officer of the CUHK Medical Centre (CUHKMC), Prof. Sylvia FUNG, Vice President (Internal), The Hong Kong Academy of Nursing Limited and Dr. Doris Ng, Head of Degree Programmes, The Hong Kong Management Association, were our guests.

On behalf of HKCHSE, Dr. LIU congratulated all the newly admitted Fellows on their achievements and wished them every success in the years ahead. Newly admitted Fellows are Dr AU Brian Kin Chung, Ms CHAU Ka Yi, Ms CHEUNG Siu Tong, Ms CHONG Jwo Ruey, Maggie, Ms CHU Kit, Ms LAM Man Shan, Patti, Ms LI Lam, Ms MAK So Shan, Dr SIU Wei Man, Bonnie, Mr SZE Mei Pong, Mr TAM Hoi Yat, Ms TONG Choi Man, Dr TSE Sut Yee and Dr WONG Kin Ho.

Dr Arthur S. K. SHAM





## Melioidosis

An abnormal high number of melioidosis cases have been recorded in Hong Kong after summer, with a cluster found in the Sham Shui Po district with an usual average of only 10 confirmed cases annually before. According to the Centre for Health Protection (CHP), between August and October, 20 people residing in 19 blocks across Sham Shui Po were infected melioidosis with no contact history with each other; and buildings are all located within a 1km radius of the Lee Cheng Uk and Pak Tin estates. Besides, 26 asymptomatic workers from a construction site in Pak Tin estates who had chronic illnesses were found to have antibodies against melioidosis bacteria.

The Water Supplies Department had **increased chlorine levels** at the Sha Tin Water Treatment Plant facility, the largest in the city, which services Sha Tin, Kowloon Central and part of Hong Kong Island, to kill the bacteria that might have caused the outbreak. **Calcium hydroxide** served as a disinfectant was also added to the soil at the construction site at Pak Tin Estate to protect workers and those living nearby. Close epidemiological investigation and observation are still running.

**Melioidosis**, also called **Whitmore's disease**, is an infectious disease caused by the bacterium *Burkholderia pseudomallei* that can infect both humans and animals such as sheep, swine, cats, dogs, etc. This bacterium is widespread in soils and muddy water, particularly common in moist clay soils. It is endemic in Southeast Asia (e.g. Singapore and Thailand) and northern Australia.

Melioidosis can be categorized as **an acute or localized infection** (such as cutaneous abscess or chronic suppurative infection), **acute pulmonary infection** (mild bronchitis to severe pneumonia), acute bloodstream infection (rapid onset with septic shock, like meningoen­cephalitis), or **disseminated infection** (abscess formation in acute or chronic melioidosis). **Sub-clinical infections** are also being possible. Common symptoms include fever, headache, localised pain or swelling, ulceration, chest pain, cough, haemoptysis, and swelling of regional lymph nodes. Melioidosis is diagnosed by isolating *Burkholderia pseudomallei* from blood, urine, sputum, skin lesions, or abscesses; or by detecting an antibody response to the bacteria.



Humans can become infected through contact with contaminated soil and surface waters (especially through skin abrasions/wounds); inhalation of contaminated dust/water droplets; and ingestion of contaminated water. **Person-to-person transmission is rare** but may occur through contact with the blood or body fluids of an infected person. Persons with underlying diseases including diabetes, lung disease, liver disease, renal disease, cancer, or immunosuppression have **higher risks** for contracting the disease. Agricultural, laboratory and health-care workers are also vulnerable to occupational exposure. **Pulmonary Infection** is the most common form of presentation; chest pain with a nonproductive or productive cough with cavity lesions as seen on those in pulmonary tuberculosis chest X-ray.

The incubation period varies, usually from **2 to 4 weeks**, but can range from 1 day to few years. Melioidosis can be treated with antibiotics. Long-term treatment may be necessary for some chronic infection cases. Mortality rate ranges from 40 to 75%. However, no vaccine is available yet for melioidosis.

In order to prevent melioidosis, people should take the following **hygienic measures** includes **avoid contact with contaminated soil**; wear appropriate protective clothing or footwear when participating

in activities with possible contact with soil or water, e.g. use gloves and wear boots; wash or shower after exposure to contaminated water or soil.

Besides, tap water should be run for one minute at the start of the day before using it for brushing teeth, washing face or bathing. We always clean any wounds as soon as possible and cover any cuts or grazes with waterproof dressings.

**Strict hand hygiene** with liquid soap and water after handling with soils or gardening. **Observe food hygiene** and avoid drinking non-boiled or untreated water; travelers can contract the disease through outdoor water sports. Risk of infection can be minimized by **avoiding exposure to water sources** (such as rivers, ponds or lakes) that might be possibly contaminated.

#### References:

- 1). Melioidosis  
<https://www.chp.gov.hk/en/healthtopics/content/24/101110.html> (accessed on 30-11-2022)
- 2). Melioidosis  
<https://www.cdc.gov/melioidosis/index.html> (accessed on 30-11-2022)

Dr. Poon WK  
ex CIC Fellow



# Application Form



## Hong Kong College of Health Service Executives 香港醫務行政學院 Year 2022-2023 New Membership Application / Renewal Form

Title : Prof / Dr / Mr / Ms / Mrs

Name:

\_\_\_\_\_

(Surname)

\_\_\_\_\_

(Other name)

❖ please ✓ in the appropriate box

☐ Please RENEW my membership (please fill up area of any changes that apply ONLY)

☐ Please consider my NEW membership application (please fill up all the below items)

HKID No.:   -   X X X (X) Sex : M / F

Professional Qualification : \_\_\_\_\_

Qualification in Health Care Management : \_\_\_\_\_

Work Position Held : \_\_\_\_\_

Place of Work : \_\_\_\_\_

(Department / Division)

(Organization / Institution)

Nature of Organization : ☐ HA ☐ Government Department ☐ Private Hospital

☐ Academic Institute ☐ Other Public Organization

☐ Commercial Organization

Correspondence Address : \_\_\_\_\_

Contact No. : (Off) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Email : \_\_\_\_\_

Membership Type	Annual Membership Fee			
	HK Membership (HKCHSE)		Dual Membership (HKCHSE and ACHSM)	
Fellow *	HK\$500	<input type="checkbox"/>	HK\$2,200	<input type="checkbox"/>
Associate Fellow **	HK\$300	<input type="checkbox"/>	HK\$2,000	<input type="checkbox"/>
Associate	HK\$200	<input type="checkbox"/>	N/A	<input type="checkbox"/>

\* Fellow membership only applied to those who have been conferred Fellowship by HKCHSE.

\*\* Qualification for Associate Fellowship: holding a degree in management or a full time managerial position.

Please send this application with cheque payable to "Hong Kong College of Health Service Executives Ltd." to P.O. Box No. 70875, Kowloon Central Post Office, Hong Kong