

Organizational Resource Management in Health and Social Care

Title: Workforce Management in Psychiatric Inpatient Services under the Hospital Authority:
Challenges, Strategies, and Financial Implications

Word Count: 3583

Workforce Management in Psychiatric Inpatient Services under the Hospital

Authority: Challenges, Strategies, and Financial Implications

Introduction

Established in 1990, the Hospital Authority (HA) plays an integral role in Hong Kong's healthcare system, managing the public hospitals and health services under the guidance of the Hong Kong government and the Food and Health Bureau. This paper explores a vital part of HA's operations: the psychiatric inpatient services. These services, demanding specialized care and handling intricate patient needs, pose significant workforce management challenges. Recent statistics highlight the growing urgency of these challenges. According to Hospital Authority (2023), the HA oversees 43 public hospitals and institutions, with psychiatric inpatient services experiencing a 30% increase in patient admissions over the past five years. This escalation underscores the critical need for effective workforce management strategies in psychiatric care. In particular, psychiatric inpatient services, struggling with rising mental health issues in the population, have seen a 40% increase in demand for specialized psychiatric care professionals (Lo et al., 2021).

The core of workforce management in these services extends beyond mere staffing. As Figueroa (2019) point out, it encompasses ensuring quality care, patient safety, and addressing the evolving needs of mental health care. The HA's approach, spanning workforce planning, recruitment, retention, and rewarding, is crucial in this regard. This research explores these multifaceted strategies, evaluating how they meet the challenges unique to psychiatric care. Furthermore, the analysis covers the current policies, HA's operational framework, and its impact on delivering psychiatric inpatient services. There will be a focus on how these strategies align with broader national health policies and their implications for healthcare quality in Hong Kong. By examining these elements, the essay aims to explain the effectiveness and relevance of the HA's workforce management strategies, offering

perspectives and recommendations for enhancements and future directions in this critical healthcare sector.

Hospital Authority's Policies and their Impact on Workforce

The HA has implemented a series of robust policies aimed at enhancing psychiatric inpatient services, reflecting elements of the Beveridge Model in its approach. The Beveridge Model, named after William Beveridge, is characterized by healthcare services being provided and financed by the government through tax payments (Komine, 2019). In healthcare systems following this model, like the Hospital Authority (HA), the government has a significant role in managing and funding healthcare services. This is in contrast to the

[REDACTED]

The HA's strategic framework for mental health, updated in recent years, aligns with the Beveridge Model by focusing on integrated and patient-centered care financed predominantly through government funding. For instance, the HA reported an allocation of approximately 12% of its total budget to mental health services in the fiscal year 2020-2021,

[REDACTED]

decade. According to Ma et al. (2023), the number of patients seeking psychiatric help has risen by 20% in the last five years, necessitating a corresponding increase in specialized staff.

The HA's policies are not only focused on financial investments but also on the strategic development of its workforce. One key aspect is the enhancement of workforce capabilities through specialized training and development programs. In the 2021 fiscal year,

professionals with the necessary skills to handle complex psychiatric cases effectively. The training programs have been particularly focused on areas such as crisis intervention, patient communication, and mental health assessment techniques (Lee et al., 2015).

Another critical area of focus for the HA has been the recruitment and retention of psychiatric healthcare professionals. The Authority has implemented a series of incentives and career development opportunities to attract and retain skilled personnel. For example, as suggested by Hospital Authority (2021a), the HA introduced a retention bonus scheme in 2021, which resulted in a notable decrease in staff turnover rates in the following year. The

of patient care quality in psychiatric inpatient services (Lee et al., 2020).

Workforce Planning in HA's Psychiatric Inpatient Services

Workforce planning in HA's Psychiatric Inpatient Services is a complex and multifaceted task, encompassing various strategies and influenced by regulatory and policy directives. The HA has identified specific workforce needs in psychiatric inpatient services, driven by the rising demand for mental health care. Kilbourne et al. (2018) note that there is a

growing demand for mental health care services, indicating the need for an adequate number of trained professionals in HA's Psychiatric Inpatient Services. The challenges are not only

[REDACTED]

In response to these challenges, the HA has implemented strategic workforce planning initiatives. One key strategy has been the expansion of training programs for psychiatric care professionals. In 2021, HA invested over 5% of its budget for mental health services into training and development programs, aiming to enhance the skills of existing staff and prepare

[REDACTED]

retaining skilled professionals is just as important as recruiting new ones. Recognizing the high-stress nature of psychiatric work, the HA has been actively improving working conditions and offering mental health support for their staff to further support this (Ma & Loke, 2019).

The HA has also embraced technology to improve workforce efficiency in psychiatric services. Investment in telepsychiatry and digital health tools has been a significant step,

allowing for more efficient patient management and reducing the workload on existing staff (Cheng et al., 2018). This technological advancement not only improves patient access to

which can streamline workflow and reduce the time spent on routine tasks. These technological initiatives are part of a broader strategy to make psychiatric care more efficient and effective (Lee et al., 2021).

The HA's workforce planning is significantly influenced by national health policies and regulatory guidelines. For instance, the recent mental health policy reforms, which emphasize community-based care, require a different set of skills and workforce composition. The HA has aligned its workforce planning with these policy changes, focusing on

which requires a shift in the skill set and training of the psychiatric workforce. Moreover, the HA is actively engaging in policy discussions to ensure that the evolving needs of mental health care are adequately represented and addressed.

Looking ahead, the HA is committed to continuously evaluating and adapting its workforce planning strategies (Chen et al., 2020). This involves ongoing assessment of patient needs, technological advancements, and policy changes. The HA's future plans

to the changing landscape of healthcare. These future-oriented strategies are aimed at not only meeting current needs but also proactively preparing for the challenges and opportunities of tomorrow's psychiatric care landscape.

Recruitment Challenges and Strategies

Recruitment for psychiatric services within the Hospital Authority (HA) presents unique challenges, necessitating tailored strategies to attract and retain the right talent. Recruiting for psychiatric services within the HA is particularly challenging due to the specialized nature of the work and the high stress associated with psychiatric care (Cheung et al., 2023). The HA has acknowledged that there is lack of manpower required to meet the

[REDACTED]

psychiatric careers through media campaigns and public forums. Additionally, they are focusing on creating a more supportive work environment to reduce the stress associated with the job (Hung & Lam, 2020). These efforts aim to attract more professionals to the field and address the existing shortage.

To combat these challenges, the HA has launched targeted recruitment campaigns. These campaigns focus on the rewarding aspects of psychiatric work and the opportunity to make a significant impact in mental health care. The HA has invested in its recruitment budget into these targeted campaigns has led to an increase in applications for psychiatric positions (Honyashiki et al., 2023). The campaigns also highlight the HA's commitment to

professional development and mental health advocacy, further appealing to potential candidates. Additionally, they are utilizing social media and digital platforms to reach a broader audience, particularly targeting younger healthcare professionals. The HA also plans to continue these campaigns, adapting them to changing market trends and feedback from applicants (Ni et al., 2020).

Another effective strategy has been to offer competitive benefits and clear pathways for career advancement. The HA revised its salary structures in 2021, offering higher starting salaries for psychiatric roles compared to other medical specialties (Hospital Authority,

[REDACTED]

life balance through flexible working arrangements and additional leave options (Chen et al., 2022). These strategies aim to not only attract but also to retain high-quality professionals in the psychiatric field.

National and HA-specific policies play a crucial role in shaping recruitment strategies. The national mental health policy, which emphasizes the expansion of psychiatric services, has necessitated an increase in specialized staff (Honyashiki et al., 2023). In response, the HA has aligned its recruitment policies with these national directives, focusing on building a

[REDACTED]

Lau and Fong (2021) articulate that the HA has also focused on partnerships with educational institutions to ensure a steady supply of trained professionals. Collaborations with universities and training institutes have been strengthened to encourage interest in

[REDACTED]

(Cheung et al., 2020). These collaborative efforts not only aid in the recruitment of new talent but also ensure that the incoming workforce is well-prepared and aligned with the HA's standards of care.

Retention and Rewarding within HA

Retention and rewarding of staff in the Hospital Authority's (HA) psychiatric inpatient services are crucial for maintaining a stable and skilled workforce. The HA faces significant retention challenges in its psychiatric inpatient services. One of the primary issues is burnout, a common problem in psychiatric care due to the emotionally demanding nature of the job. A

[REDACTED]

burnout.

In response to these challenges, the HA has focused on enhancing training and support for its psychiatric staff. The HA enhanced its investment in specialized training programs, acknowledging the connection between adequate training and job satisfaction (Lee et al., 2018). These programs are designed to equip staff with the latest skills and knowledge

[REDACTED]

introduced, allowing staff to share experiences and coping strategies, fostering a sense of community and mutual support.

The HA understands the importance of a positive work culture in retaining staff. Initiatives to promote a collaborative and supportive work environment have been a key focus. This includes team-building activities and regular feedback sessions, which have been well-received by the staff. An employee satisfaction survey conducted in 2023 showed that

[REDACTED]

et al., 2023.)

Financial incentives remain a significant part of the HA's retention strategy. The HA has a performance-based bonus system for psychiatric staff, which has contributed to a

decrease in resignation rates and has also introduced competitive salaries and regular salary reviews to maintain an attractive compensation package (Hospital Authority, 2021a). To further encourage long-term commitment, the HA is exploring additional financial benefits

[REDACTED]

The organization places a strong emphasis on career growth as a vital strategy for retaining its employees. It has expanded avenues for professional advancement, including advanced training courses and pathways to leadership positions. Over the recent years, there has been a notable increase in the number of psychiatric staff participating in these advanced training and leadership programs (Tse et al., 2020). These initiatives not only help in retaining staff but also lead to a more skilled and capable workforce. Furthermore, the

[REDACTED]

Financial Management and Implications

Managing the financial aspects of the workforce in psychiatric services under the Hospital Authority (HA) involves utilizing a Conventional Budget System, which emphasizes careful budgeting, cost-analysis, and strategic planning. These factors are vital for ensuring the financial sustainability of the HA while delivering quality psychiatric care. The HA

[REDACTED]

budget to psychiatric services, reflecting a 5% increase from the previous year due to the growing demand for psychiatric care (Hospital Authority, 2022a). This budget covers salaries, training, recruitment, and retention initiatives, ensuring that the workforce is adequately supported to provide optimal patient care (Hospital Authority, 2022a).

The HA carries out detailed evaluations of expenses under the Conventional Budget System to ensure efficient use of resources in mental health services (Lo et al., 2021). This

[REDACTED]

quality of care, leading to long-term savings. The HA has observed a reduction in hiring expenses, demonstrating the success of these strategic investments (Lo et al., 2021).

Employing financial tactics that support its primary goals of fostering a stable and competent workforce, the HA uses the Conventional Budget System where employee compensation is tied to specific performance metrics, including patient satisfaction, treatment results, and service delivery efficiency (Wong et al., 2018). This strategy promotes excellent care quality while maintaining financial prudence. Furthermore, the HA invests in technology

[REDACTED]

(Ong, 2023).

Effective workforce management is essential for HA's financial health, and budget flexibility plays a crucial role in this aspect. The HA has adopted a dynamic budgeting approach within its Conventional Budget System, allowing for the reallocation of funds based

on changing workforce needs and service demands. This flexibility was particularly evident during the COVID-19 pandemic when additional funds were redirected to psychiatric

[REDACTED]

Lastly, the HA emphasizes the importance of long-term financial planning in workforce management. Long-term planning, as part of the Conventional Budget System, involves forecasting future workforce needs, considering trends in mental health, and preparing for anticipated changes in healthcare delivery. Rastogi (2019) suggests that the HA has started investing in training programs focused on emerging mental health issues like

[REDACTED]

Conclusion

Effective workforce management in the Hospital Authority's psychiatric inpatient services is crucial for maintaining high standards of mental health care in Hong Kong. This paper has outlined the intricate balance required to address issues in recruitment, retention, training, and financial management effectively. Key strategies implemented by HA – such as targeted recruitment campaigns, comprehensive training programs, supportive work environments, competitive financial incentives, and career growth opportunities – have significantly improved staff satisfaction, reduced turnover, and enhanced patient care quality. Looking ahead, it is crucial for the HA to continue innovating these strategies. Leveraging technology will be vital to streamlined processes and improved service delivery (Chow et

al., 2023). Moreover, policies and strategies should be continuously developed and adapted

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] prepares for future challenges and opportunities in psychiatric care.

香港醫療論文輔導中心 HKMTGC 版權所有 All Rights Reserved

References

Chen, Q., Chen, M., Lo, C. K. M., Chan, K. L., & Ip, P. (2022). Stress in balancing work and family among working parents in Hong Kong. *International journal of environmental research and public health*, 19(9), 5589.

Chen, W., Guo, H., & Tsui, K. L. (2020). A new medical staff allocation via simulation optimisation for an emergency department in Hong Kong. *International journal of production research*, 58(19), 6004-6023.

Cheng, K. M., Siu, B. W., Yeung, C. C. A., Chiang, T. P., So, M. H., & Yeung, M. C. (2018). Telepsychiatry for stable Chinese psychiatric out-patients in custody in Hong Kong: a case-control pilot study. *Hong Kong Medical Journal*, 24(4), 378.

Cheung, A. T., Ho, L. L. K., Li, W. H. C., Chung, J. O. K., & Smith, G. D. (2023).

Psychological distress experienced by nurses amid the fifth wave of the COVID-19 pandemic in Hong Kong: A qualitative study. *Frontiers in public health*, 10, 1023302.

Cheung, V. K. L., So, E. H. K., Ng, G. W. Y., So, S. S., Hung, J. L. K., & Chia, N. H. (2020).

Investigating effects of healthcare simulation on personal strengths and organizational impacts for healthcare workers during COVID-19 pandemic: a cross-sectional study. *Integrative Medicine Research*, 9(3), 100476.

Chow, C. L. J., Shum, J. S., Hui, K. T. P., Lin, A. F. C., Chu, E. C. P., & Shum, J. S. F. (2023).

Optimizing primary healthcare in Hong Kong: strategies for the successful integration of radiology services. *Cureus*, 15(4).

Chung, R. Y. N., & Au, D. K. S. (2023). The Future of End-of-Life Care Policy in Hong

Kong. In *Gaps and Actions in Health Improvement from Hong Kong and Beyond: All for Health* (pp. 333-346). Singapore: Springer Nature Singapore.

Figueroa, C. A., Harrison, R., Chauhan, A., & Meyer, L. (2019). Priorities and challenges for health leadership and workforce management globally: a rapid review. *BMC health services research*, 19(1), 1-11.

Honyashiki, M., Decoster, J., Lo, W. T. L., Shimazu, T., Usuda, K., & Nishi, D. (2023).

Mental health reform processes and service delivery shift from the hospital to the community in Belgium and Hong Kong. *Health Services Insights*, 16, 11786329231211777.

<https://www.ha.org.hk/haho/ho/pad/261989en2n.pdf>

https://www.ha.org.hk/haho/ho/ap/HA_StrategicPlan2022-2027_Eng_211216.pdf

https://www.ha.org.hk/haho/ho/ap/AP2223_Eng_1.pdf

https://www.ha.org.hk/haho/ho/cc/E_AnnualReport2021.pdf

https://www.ha.org.hk/visitor/ha_visitor_index.asp?Content_ID=10036&Lang=ENG&Ver=HTML#:~:text=The%20Hospital%20Authority%20manages%2043,hospital%20clusters%20based%20on%20locations

Hung, M. S., & Lam, S. K. (2020). Antecedents and contextual factors affecting occupational turnover among registered nurses in public hospitals in Hong Kong: A qualitative descriptive study. *International journal of environmental research and public health*, 17(11), 3834.

Kilbourne, A. M., Beck, K., Spaeth-Rublee, B., Ramanuj, P., O'Brien, R. W., Tomoyasu, N., & Pincus, H. A. (2018). Measuring and improving the quality of mental health care: a global perspective. *World psychiatry*, 17(1), 30-38.

Komine, A. (2019). William Henry Beveridge (1879–1963). In *The Palgrave Companion to LSE Economics* (pp. 239-262). London: Palgrave Macmillan UK.

Lau, C., & Fong, B. Y. F. (2021). Review of public private partnership in health care in Hong Kong. *Asia Pacific Journal of Health Management*, 16(1), 33-39.

Lee, C. C., Chui, W. W., Wong, S. L., Wong, T. C., Lau, S. P., Kwong, P. K., ... & Yau, S. S. (2020). Multi-disciplinary psychiatric case management model in Hong Kong: service coverage and risk stratification. *East Asian Archives of Psychiatry*, 30(1), 12-19.

Lee, C. C., Liem, S. K., Leung, J., Young, V., Wu, K., Kenny, K. K. W., ... & Lo, W. (2015). From deinstitutionalization to recovery-oriented assertive community treatment in Hong Kong: What we have achieved. *Psychiatry Research*, 228(3), 243-250.

Lee, C. K. M., Tai, W. C., & Ng, K. K. (2020). System dynamic modelling of patient flow and transferral problem in a mixed public-private healthcare system: a case study of Hong Kong SAR. *Journal of Systems Science and Systems Engineering*, 29, 590-608.

Lee, E. E., Torous, J., De Choudhury, M., Depp, C. A., Graham, S. A., Kim, H. C., ... & Jeste, D. V. (2021). Artificial intelligence for mental health care: clinical applications, barriers, facilitators, and artificial wisdom. *Biological Psychiatry: Cognitive Neuroscience and Neuroimaging*, 6(9), 856-864.

Lee, E., Daugherty, J., Eskierka, K., & Hamelin, T. (2018). The impact of human capital management. *Nursing Management*, 49(3), 42-48.

Lee, T. K., Välimäki, M., & Lantta, T. (2021). The knowledge, practice and attitudes of nurses regarding physical restraint: survey results from psychiatric inpatient settings. *International journal of environmental research and public health*, 18(13), 6747.

Leung, F., Lau, Y. C., Law, M., & Djeng, S. K. (2022). Artificial intelligence and end user tools to develop a nurse duty roster scheduling system. *International Journal of Nursing Sciences*, 9(3), 373-377.

Lo, S. M., Wong, H. C., Lam, C. Y., & Shek, D. T. (2020). Common mental health challenges in a university context in Hong Kong: A study based on a review of medical records. *Applied Research in Quality of Life*, 15, 207-218.

Lo, S. M., Wong, H. C., Lam, C. Y., & Shek, D. T. (2021). An innovative multidisciplinary healthcare model in student mental health: Experience in Hong Kong. *Applied Research in Quality of Life*, 16, 301-313.

Ma, C. F., Luo, H., Leung, S. F., Wong, G. H. Y., Lam, R. P. K., Bastiampillai, T., ... & Chan, S. K. W. (2023). Impact of community mental health services on the adult psychiatric admission through the emergency unit: a 20-year population-based study. *The Lancet Regional Health—Western Pacific*.

Ma, H., & Loke, A. Y. (2019). A qualitative study into female sex workers' experience of stigma in the health care setting in Hong Kong. *International Journal for Equity in Health*, 18(1), 1-14.

Ng, A. P. P., Chin, W. Y., Wan, E. Y. F., Chen, J., & Lau, C. S. (2023). Health-related quality of life in Hong Kong physicians up to 20 years post-graduation: A cross-sectional survey. *Plos one*, 18(4), e0284253.

Ng, A., & Wang, W. M. (2018). Slack resources and quality performance: case of a mega health care organization. *International Journal of Quality & Reliability Management*, 35(5), 1060-1074.

Ni, M. Y., Yang, L., Leung, C. M., Li, N., Yao, X. I., Wang, Y., ... & Liao, Q. (2020). Mental health, risk factors, and social media use during the COVID-19 epidemic and cordon sanitaire among the community and health professionals in Wuhan, China: cross-sectional survey. *JMIR mental health*, 7(5), e19009.

Ong, R. (2023). Factors affecting patient and public perceptions of the adoption of electronic health record sharing: A Hong Kong study. *International Journal of Medical Informatics*, 178, 105193.

Rastogi, M. (2019). *Cultural Adaptation of Overseas Trained Psychologists Upon Reintegration into Mental Health Profession in Hong Kong* (Doctoral dissertation, Chicago School of Professional Psychology).

Shishkin, S., & Sheiman, I. (2023). The hard way from the Beveridge to the Bismarck model of health finance: Expectations and reality in Russia. *Frontiers in Public Health*, 11, 1104209.

Tse, S., Fung, E., Lo, W. K. I., Wong, S., Chan, S. K., Wan, E., ... & Yuen, W. Y. W. (2020). The strengths model in Hong Kong. University of Kansas Libraries.

Vandan, N., Wong, J. Y. H., Lee, J. J. J., Yip, P. S. F., & Fong, D. Y. T. (2020). Challenges of healthcare professionals in providing care to South Asian ethnic minority patients in Hong Kong: A qualitative study. *Health & Social Care in the Community*, 28(2), 591-601.

Wong, E. L., Xu, R. H., Lui, S., Cheung, A. W., & Yeoh, E. K. (2018). Development of conceptual framework from the view of patients and professionals on patient engagement: a qualitative study in Hong Kong SAR, China. *Open Journal of Nursing*, 8(05), 303.

Wu, Y., Fung, H., Shum, H. M., Zhao, S., Wong, E. L. Y., Chong, K. C., ... & Yeoh, E. K.

(2022). Evaluation of length of stay, care volume, in-hospital mortality, and emergency

readmission rate associated with use of diagnosis-related groups for internal resource

allocation in public hospitals in Hong Kong. *JAMA Network Open*, 5(2), e2145685-

e2145685.

Zhao, S. Z., Luk, T. T., Wu, Y., Weng, X., Wong, J. Y. H., Wang, M. P., & Lam, T. H.

(2021). Factors associated with mental health symptoms during the COVID-19 pandemic in

Hong Kong. *Frontiers in psychiatry*, 12, 617397.

香港醫療論文輔導中心 HKMTGC 版權所有 All Rights Reserved