

LCQ14: Remuneration of Hospital Authority staff

Following is a question by the Dr Hon Priscilla Leung and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (May 8):

Question:

Some members of the public have relayed to me that although the Hospital Authority (HA) recorded operating deficits for two consecutive years, its senior executives were still given pay rises. Also, there has been a case of "fattening the top and slimming the bottom". In this connection, will the Government inform this Council:

(1) whether it knows the number of senior executives in HA, with a breakdown by the group (in bands of \$500,000 apart) to which their annual salary belonged, and the average annual pay increment of such executives, in each of the past three years;

(2) whether it knows the criteria and factors based on which HA determines the pay level and the magnitude of pay adjustment for its senior executives; whether those criteria and factors include the financial position, staff wastage rate and service quality of HA; if they are not included, whether HA will take into account such factors in future; if they are included, of the overall wastage rate of HA's full-time staff and the wastage rate of full-time staff in each healthcare grade, and whether there were cases in which HA ran an operating deficit with its staff wastage rate standing high and patients' waiting time for services being long and yet its senior executives were given a pay rise, in each of the past three years; and

(3) whether it will allocate additional resources to HA so that the cash allowance for staff appointed in or after April 1998 can be linked to their basic salary to align with the entitlements of those staff appointed prior to such time, with a view to reducing the wastage of healthcare workers?

Reply:

President,

My reply to the various parts of the question raised by the Dr Hon Priscilla Leung is as follows:

(1) The manpower situation and remuneration of the key management personnel of the Hospital Authority (HA) in 2016-17 and 2017-18 are set out in the table below:

Rank	2016-17		2017-18		Increase (per cent)
	No. of personnel	Remuneration	No. of personnel	Remuneration	
Chief Executive	1	\$6.00 million	1	\$6.02 million	0.3 per cent
Directors, Heads and Cluster Chief Executives	14	\$64.84 million	14	\$66.98 million	3.3 per cent

Note:

(i) Remuneration includes basic salaries, other short-term employee benefits and post-employment benefits.

(ii) The actual expenditure for 2018-19 will only be available after completion of the Annual Financial Statements

(2) In general, the HA will take factors such as internal relativities, pay level in the market and affordability of the organisation into account in determining the remuneration of its senior executives. Their remuneration is also subject to annual adjustments in accordance with prevailing human resources policy on salary increment.

(3) The differences in the terms of appointment and remuneration packages of staff members joining the HA at different times are due to organisational development and other background factors. The Government and the HA strive to attract, develop and retain healthcare manpower to ensure the quality of public healthcare services. In the 2019-20 Budget, the Government announced the provision of additional recurrent funding of \$721 million for the HA to implement enhancement measures to boost staff morale and retain talent. With the dedicated resources, the HA is working out the details of the enhancement measures, with a view to striving for their early implementation in 2019-20 to benefit frontline staff. The measures include:

(1) continuation of the Special Retired and Rehire Scheme for doctors, nurses and allied health staff;

(2) enhancement of the Fixed Rate Honorarium for doctors;

(3) enhancement of promotion prospects for nurses (increasing the number of Advanced Practice Nurse posts to enhance senior coverage and nursing supervision in wards at night);

(4) implementation of Specialty Nurse Increment for registered nurses with the required qualifications;

(5) enhancement of promotion prospects for allied health professionals and pharmacists;

(6) measures to attract and retain supporting staff (pay enhancement for supporting staff and recruitment of additional Executive Assistants in wards); and

(7) measures for alleviating service demand during winter surges (further

uplift of the rate of the Special Honorarium Scheme allowance so as to encourage staff participation).

The HA will also continue to formulate and implement other human resources measures, including hiring full-time and part-time healthcare professionals and agency nurses, rehiring suitable retired healthcare staff and increasing the number of training places for Resident Trainees. The Government will continue to provide the HA with appropriate resources to attract and retain staff.