

立法會
Legislative Council

Ref : CB2/PL/HS

LC Paper No. CB(2)668/11-12
(These minutes have been seen
by the Administration)

Panel on Health Services

**Minutes of special meeting
held on Monday, 4 July 2011, at 8:30 am
in the Chamber of the Legislative Council Building**

- Members present** : Dr Hon LEUNG Ka-lau (Chairman)
Dr Hon Joseph LEE Kok-long, SBS, JP (Deputy Chairman)
Hon Albert HO Chun-yan
Ir Dr Hon Raymond HO Chung-tai, SBS, S.B.St.J., JP
Hon CHEUNG Man-kwong
Hon Andrew CHENG Kar-foo
Hon LI Fung-ying, SBS, JP
Hon Audrey EU Yuet-mee, SC, JP
Hon Cyd HO Sau-lan
Hon CHAN Hak-kan
Hon CHAN Kin-por, JP
Hon IP Kwok-him, GBS, JP
Dr Hon PAN Pey-chyou
- Members absent** : Hon Fred LI Wah-ming, SBS, JP
Hon CHEUNG Kwok-che
Hon Alan LEONG Kah-kit, SC
Hon Albert CHAN Wai-yip
- Public Officers attending** : Professor Gabriel M LEUNG, JP
Under Secretary for Food and Health
- Miss Gloria LO
Acting Deputy Secretary for Food and Health
(Health) 1

Dr LIU Hing-wing
Director (Quality & Safety)
Hospital Authority

Dr Lawrence LAI
Senior Advisor (Medical Affairs)
Hospital Authority

Dr Stephen PANG Fei-chau
Chief Manager (Quality & Standards)
Hospital Authority

Attendance by invitation : The Society of Hospital Pharmacists of Hong Kong

Mr William CHUI Chun-ming
Vice-President

Association of Hong Kong Nursing Staff

Mr CHAN Wai-man
Assistant Secretary

Hong Kong Private Hospitals Association

Dr Alan LAU Kwok-lam
Chairman

Matilda International Hospital

Dr Hans Schrader
Executive Medical Director

Hong Kong Prosthetists and Orthotists Association

Mr David CHUNG Ka-wai
Chairman

Hong Kong Radiographers' Association

Mr CHAN Hung-tat
Vice Chairman

Hong Kong Physiotherapy Association

Ms Priscilla POON Yee-hung
President

Hong Kong Clinical Psychologists Association

Ms Mary LEE
Representative

Hong Kong Nutrition Association

Ms Sally POON
Continuing Education Sub-committee

Hong Kong Association of Radiation Therapists

Mr LEE Wing-yiu
Chairman

Hong Kong Physiotherapists' Union

Mr LAU Siu-on
Chairman

Frontline Doctors' Union

Dr YUEN Mang-ho
Vice-Chairman

Alice Ho Miu Ling Nethersole Hospital Doctors'
Association Limited

Dr Richard YEUNG Sai-dat
Chairman

United Christian Hospital Doctors' Association

Dr LEUNG Man-fuk
Consultant, Department of Medicine and Therapeutics

Mr Michael LING Ho-ming
Appointed ACHS (Hong Kong) Surveyor

Dr Grace CHENG
Appointed ACHS (Hong Kong) Surveyor

Dr Alexander CHIU
Appointed ACHS (Hong Kong) Surveyor

Dr LUI Siu-fai
Appointed ACHS (Hong Kong) Surveyor

爭取醫生合理工時行動組

Dr NG Chi-ho

Mr CHAN How-chi
Member of Hospital Governing Committee of the
Tuen Mun Hospital and Member of Regional
Advisory Committee of Hospital Authority

Alliance for Patients' Mutual Help Organizations

Mr CHEUNG Tak-hei
Vice-Chairman

Hong Kong Liver Transplant Patient's Association

Mr Charlie YIP Wing-tong
Member

Mutual Aid Association

Mr Tony CHOW
Chairman

Society for Community Organization

Mr Tim PANG
Community Organizer

Tuen Mun Hospital Doctors' Association

Dr YAM Ping-wa
Associate Consultant

Clerk in attendance : Ms Elyssa WONG
Chief Council Secretary (2)5

Staff in attendance : Ms Ivy CHENG
Research Officer 6

Ms Maisie LAM
Senior Council Secretary (2)5

Ms Priscilla LAU
Council Secretary (2)5

Ms Sandy HAU
Legislative Assistant (2)5

Action

- I. Implementation of hospital accreditation in public hospitals**
(LC Paper Nos. CB(2)1441/10-11(05), IN16/10-11, CB(2)2239/10-11(01) to (06), CB(2)2260/10-11(01) to (03) and CB(2)2307/10-11(01) to (07))

Views of deputations

At the invitation of the Chairman, the following 25 deputations presented their views on hospital accreditation in public hospitals -

- (a) The Society of Hospital Pharmacists of Hong Kong;
- (b) Association of Hong Kong Nursing Staff;
- (c) Hong Kong Private Hospitals Association;
- (d) Matilda International Hospital;
- (e) Hong Kong Prosthetists and Orthotists Association;
- (f) Hong Kong Radiographers' Association;
- (g) Hong Kong Physiotherapy Association;
- (h) Hong Kong Clinical Psychologists Association;

Action

- (i) Hong Kong Nutrition Association;
- (j) Hong Kong Association of Radiation Therapists;
- (k) Hong Kong Physiotherapists' Union;
- (l) Frontline Doctors' Union;
- (m) Alice Ho Miu Ling Nethersole Hospital Doctors' Association Limited;
- (n) United Christian Hospital Doctors' Association;
- (o) Mr Michael LING Ho-ming;
- (p) Dr Grace CHENG;
- (q) Dr Alexander CHIU;
- (r) Dr LUI Siu-fai;
- (s) 爭取醫生合理工時行動組;
- (t) Mr CHAN How-chi;
- (u) Alliance for Patients' Mutual Help Organizations;
- (v) Hong Kong Liver Transplant Patient's Association;
- (w) Mutual Aid Association;
- (x) Society for Community Organization; and
- (y) Tuen Mun Hospital Doctors' Association.

2. Members also noted the written submissions from the following individuals/organizations -

- (a) The Pharmaceutical Society of Hong Kong;
- (b) Professor LEE Sum-ping;
- (c) Hong Kong Pharmacists (Public Service) Association;

Action

- (d) 31 appointed ACHS (Hong Kong) Surveyors;
- (e) Professor FOK Tai-fai;
- (f) Dr K F WONG;
- (g) The Tseung Kwan O Hospital Doctors' Association;
- (h) Dr Anne LEE;
- (i) Hong Kong Occupational Therapy Association; and
- (j) Mrs Fan WONG;

A summary of views of the deputations is in the **Appendix**.

Briefing by the Research Division of the Legislative Council Secretariat

3. Research Officer 6 of the Research Division briefed members on the major accreditation schemes adopted by hospitals in Australia, the United States and Taiwan, details of which were set out in the information note prepared by the Research Division (LC Paper No. IN16/10-11).

The Administration's response to the views expressed by deputations

4. Responding to the views expressed by the deputations, Under Secretary for Food and Health ("USFH") made the following points -

- (a) the Administration attached great importance to the views of the hospital staff on the hospital accreditation programme, as active and committed participation of both the hospital management and frontline healthcare personnel was the key to successful implementation of the accreditation programme. The Hospital Authority ("HA") had also gauged the views of its staff and the patient groups on the accreditation programme through various channels; and
- (b) while the Administration was pleased to learn the positive response of many attending deputations to the accreditation programme, in particular towards its benefits in enhancing service quality and patient safety through the development of a set of common standards for measuring the performance of

Action

the participating hospitals in various aspects, it fully understood the increase in workload arising from the implementation of the programme on the part of the hospital staff. The Administration and HA would take heed of the attending deputations' views and comments when mapping out the implementation plan for the next phase of the programme.

5. Director (Quality & Safety), HA supplemented with the following points -

- (a) with advancement in medical knowledge and technology, the inherent risk of the new sophisticated treatment methods had increased. Given that hospital accreditation was widely adopted internationally as a useful measure to sustain and improve the quality of healthcare services by benchmarking with best practices in the field and international standards, HA welcomed the Administration's initiative to introduce a three-year pilot scheme of hospital accreditation ("the Pilot Scheme") in 2009. With dedicated efforts of hospital staff, the five participating public hospitals had been awarded four-year full accreditation status. HA took this opportunity to thank the hard work of its staff in implementing the Pilot Scheme;
- (b) HA understood that the implementation of the Pilot Scheme had increased the workload of and exerted enormous pressure on its frontline staff. Measures would therefore be put in place to slow down the accreditation pace in this year, reduce unnecessary work steps, set up a database for sharing the experience of the pilot hospitals to avoid duplication of work, and strengthen communication and support to frontline staff. In addition, the preparatory time of the next phase of the accreditation programme would be extended to five years. The HA Head Office would also provide additional resources and co-ordinate the improvement work as recommended under the first phase of the accreditation programme; and
- (c) in the past few months, HA had actively worked out a series of measures through the allocation of additional resources and improvement of the employment package to improve staff retention and strengthen the workforce in order to

Action

address the manpower constraint of HA. It was expected that manpower stringency would be improved in the near future.

Discussion

Implementation of hospital accreditation

6. Ms LI Fung-ying criticized the Administration and HA for failing to allay the main concern raised by the deputations on the inadequacy of resources and manpower in coping with the increase in workload arising from the implementation of the hospital accreditation programme.

7. USFH responded that efforts would be made by HA to minimize documentation and manual inputs by frontline healthcare staff through wider use of information technology. USFH further said that HA would continue to monitor its healthcare manpower situation and make suitable arrangements in manpower planning to cope with service and operational needs, regardless of whether there was an accreditation programme in place. However, it would not be appropriate for HA to assign a dedicated team of frontline healthcare staff to handle the accreditation related work of all participating hospitals on a rotation basis, as staff who were involved in and familiar with the daily operation of the participating hospital would be in the best position to prepare the hospital for the accreditation surveys.

8. Dr PAN Pey-chyou noted that while many deputations were positive to the implementation of hospital accreditation in public hospitals so as to enhance service quality and patient safety, there was a common concern about the inadequacy of manpower to cope with the increased workload, as frontline healthcare staff had already been working under immense pressure with the current manpower stringency. He enquired whether, and if so, what additional resources and manpower had been allocated to the five public hospitals participated in the Pilot Scheme.

9. Chief Manager (Quality & Standards), HA advised that apart from an additional funding of \$12.5 million for engaging the Australian Council on Healthcare Standards ("ACHS") as the accreditation agent to launch the Pilot Scheme, the Administration had allocated some \$10 million for the five participating public hospitals to carry out the preparatory work for the accreditation. Each participating hospital had also been provided with several supporting staff to provide clerical support for the Pilot Scheme.

Action

10. Director (Quality & Safety), HA supplemented that additional funding would also be allocated to the participating hospitals through the annual resource allocation system of HA for their implementation of large-scale follow-up works in areas that required improvement, such as replacement of sterilization equipment. Director (Quality & Safety), HA assured members that HA would make appropriate healthcare manpower planning and deployment according to operational needs.

Admin/HA

11. The Chairman requested HA to provide after the meeting information on the breakdown by the five participating hospitals of the additional funding and manpower allocated for the implementation of hospital accreditation.

12. Ms Cyd HO held the view that the Administration should allocate additional resources to HA for hospitals participating in the Pilot Scheme to implement follow-up work for areas that required improvement.

13. USFH advised that the Government's annual recurrent expenditure on the public healthcare system had increased from \$30.5 billion in 2007-2008 to \$39.9 billion in 2011-2012 for HA to strengthen its manpower, improve its hardware and software, and carry out various initiatives. The Administration aimed to increase the health budget from the current 16.6% of the Government's recurrent expenditure to 17% in 2012. It would take into account, among others, the resources required for implementing hospital accreditation when determining the resources allocation for HA.

14. Ms Cyd HO considered that a bottom-up approach, rather than top-down directives, should be adopted in drawing up the follow-up action plan in response to the recommendations made under the organization-wide surveys for individual hospitals. USFH agreed that the frontline staff of the hospitals, rather than the Food and Health Bureau, would be most appropriate to derive the follow-up action plans.

Staff morale

15. Ms LI Fung-ying sought explanation for the opposing views expressed by Mr CHAN How-chi, who was a member of the Hospital Governing Committee of the Tuen Mun Hospital, and frontline doctors of the Tuen Mun Hospital, including Dr YUEN Mang-ho of the Frontline Doctors' Union and Dr NG Chi-ho of 爭取醫生合理工時行動組, on the response of the hospital staff towards the accreditation programme. Mr Albert HO expressed a similar concern.

Action

16. Mr CHAN How-chi said that he had relayed the problem of the shortage of healthcare professionals at the Tuen Mun Hospital as reported by the media to the Hospital Governing Committee. Efforts had been made by the Tuen Mun Hospital to employ more healthcare professionals to strengthen its manpower. Mr CHAN further pointed out that from his observation, healthcare professionals of the Hospital had a high morale not only on the day of being awarded the four-year full accreditation status, but also throughout the preparation process for the accreditation surveys.

17. USFH explained that being awarded full accreditation status did not imply that the various problems faced by the hospital concerned, such as high turnover rate in individual specialties, had been solved. Hospital staff should consider the accreditation exercise as a process for continuous quality improvement through collaboration and teamwork to work towards a common goal, instead of putting the emphasis on the rating of the level of achievement.

Criterion achievement ratings

18. Mr Albert HO was concerned that, as pointed out by Frontline Doctors' Union and 爭取醫生合理工時行動組, many specialties of the Tuen Mun Hospital had been stretched to their capacity limits and that patient care had been compromised. Mr HO invited views from the attending ACHS (Hong Kong) Surveyors on whether hospital accreditation could reflect accurately the gaps in the quality of care delivered which required improvements.

19. Pointing out that the implementation of hospital accreditation had resulted in an array of problems ranging from manpower, resources, workload, support, documentation to communication, Dr Joseph LEE wondered why the five participating hospitals in the Pilot Scheme were commended for good practices in a number of aspects and could be awarded four-year full accreditation status.

20. The Chairman informed members of his decision to extend the meeting for 15 minutes beyond its appointed time to allow more time for discussion.

21. Mr Michael LING assured members that any problems which could compromise patient care would be reflected in the organization-wide accreditation surveys. The hospital concerned had to identify whether the gaps were caused by an inadequacy of manpower or other

Action

system factors and take follow-up actions to address the problems. Stressing that the accreditation exercise was not aimed at identifying flaws of the hospitals, Mr LING said that there was no need for hospital staff to require every function of a hospital to attain the highest achievement rating when preparing for the accreditation surveys.

22. Dr Alexander CHIU made the following points -

- (a) for each of the 45 EQuIP 4 ("Evaluation and Quality Improvement Program") criteria, a hospital was only required to have an awareness of the basic requirements and comply with the relevant policy and legislation in order to attain the "Little Achievement" rating. A hospital that had in addition developed and implemented systems for the relevant activities would be rated as attaining "Some Achievement". If a hospital had in addition put in place efficient systems in collecting relevant outcome data, as well as evaluation procedures and methods of improvement, it would be rated as attaining "Moderate Achievement";
- (b) as regards the attainment of "Extensive Achievement", a hospital was required to benchmark their performance against other hospitals, and/or put in place advanced implementation strategies and/or achieve excellent outcomes for the criterion concerned. A hospital which was a peer leader in systems and outcomes in a particular criterion would be rated as attaining "Outstanding Achievement"; and
- (c) accreditation was a process for continuous improvement. Apart from documenting the achievement ratings for the EQuIP 4 criteria, the organization-wide survey reports would highlight the areas which required improvement and provide recommendations on the appropriate follow-up actions. Recommendations in the survey report needed to be reviewed and prioritized for prompt action by the hospital concerned. The surveyor team would review and comment on the progress made in relation to these recommendations at the next onsite survey.

23. Dr LUI Siu-fai said that given the complexity of hospital settings, it was necessary to develop a set of common hospital accreditation standards to ensure that essential systems and measures for the delivery of safe and quality healthcare services were in place. Dr LUI admitted

Action

that the implementation process of accreditation would be difficult as it involved a major change in the quality management system, work practice and culture of a hospital.

24. Ms Audrey EU held the view that the existing doctor-to-patient and nurse-to-patient ratios were far below the reasonable level for the delivery of quality patient care. Noting that human resources management was one of the standards of the support function, Ms EU sought explanation from the attending ACHS (Hong Kong) surveyors on why hospitals participated in the Pilot Scheme could be awarded full accreditation status in these circumstances.

25. Mr Michael LING advised that given that the healthcare personnel to patient staffing ratios of different hospitals and countries varied, there was no specification of these ratios under the EQuIP standards framework. The Surveyors would take into consideration the factors of quality and safety when assessing the patient care of a hospital. In response to the Chairman's enquiry as to whether the sample size of the accreditation survey was sufficiently large to generate reliable outcomes, Mr LING advised that the Surveyors would discuss with the frontline healthcare personnel and take into account the views collected in the assessment process.

26. Dr Alexander CHIU supplemented that the Surveyors would give careful consideration as to whether the existing level of patient care was reasonable and sustainable given the manpower and resources constraints. Recommendation of measures to improve the relevant elements with a view to further enhancing patient care would be made to the hospital concerned for its implementation before the next round of organization-wide accreditation survey.

27. Pointing out that there was no mention of the need to address the issue of short consultation time for patients at the outpatient clinics of the Tuen Mun Hospital after the accreditation exercise, Dr YUEN Mang-ho of Frontline Doctors' Union opined that accreditation could not reflect the true picture of the problems of a hospital.

Admin/HA 28. At the request of Ms Audrey EU, USFH agreed to provide after the meeting information on whether issues relating to the shortage of healthcare manpower were identified in the organization-wide accreditation survey of the Tuen Mun Hospital.

Action

Conclusion

29. Concluding the discussions, the Chairman thanked the attending deputations for giving views on the subject. The Chairman suggested that the Administration and HA should update the Panel on the progress of the hospital accreditation programme in the future. Members raised no objection to the Chairman's suggestion.

30. There being no other business, the meeting ended at 10:52 am.

Council Business Division 2
Legislative Council Secretariat
22 December 2011

Panel on Health Services

**Special meeting on Monday, 4 July 2011
on Implementation of hospital accreditation in public hospitals**

Summary of views and concerns expressed by deputations/individuals

Organization / individual	Major views and concerns
Implementation of hospital accreditation in public hospitals	
<ul style="list-style-type: none">• Alliance for Patients' Mutual Help Organizations• Hong Kong Clinical Psychologists Association• Hong Kong Liver Transplant Patient's Association• Hong Kong Occupational Therapy Association• Hong Kong Pharmacists (Public Service) Association• Hong Kong Physiotherapy Association• Hong Kong Prosthetists and Orhotists Association• Mutual Aid Association• The Pharmaceutical Society of Hong Kong• Society for Community Organization• The Society of Hospital Pharmacists of Hong Kong	<ol style="list-style-type: none">1. The deputations express support for the implementation of hospital accreditation in public and private hospitals. In their views, hospital accreditation brings about various benefits: improving the quality of healthcare services and patient safety; enhancing transparency of hospitals; and promoting continuous improvement. By promoting quality and safety in the healthcare setting, hospital accreditation can increase public confidence in the healthcare system. Hospital accreditation also helps align the service standard among different hospital clusters, as well as between public and private hospitals.2. Many deputations, in particular the patient groups, point out that improvements have been observed in the areas of the doctor-patient consultation time, communication with patients as well as morale of frontline hospital staff, after the implementation of the hospital accreditation pilot scheme.3. Many deputations point out that the workload of staff has increased after the implementation of hospital accreditation. They call on the Hospital

Organization / individual	Major views and concerns
<ul style="list-style-type: none"> • 31 appointed ACHS (Hong Kong) Surveyors • Mr CHAN How-chi, Hospital Governing Committee of Tuen Mun Hospital and Regional Advisory Committee of Hospital Authority • Dr Grace CHENG, Appointed ACHS (Hong Kong) Surveyor • Dr Alexander CHIU, Appointed ACHS (Hong Kong) Surveyor • Professor FOK Tai-fai, SBS, JP, Faculty of Medicine, The Chinese University of Hong Kong • Dr Anne LEE, Department of Clinical Oncology, Pamela Youde Nethersole Eastern Hospital • Professor LEE Sum-ping, Li Ka Shing Faculty of Medicine, The University of Hong Kong • Mr Michael LING Ho-ming, Appointed ACHS (Hong Kong) Surveyor • Dr LUI Siu-fai, Appointed ACHS (Hong Kong) Surveyor • Mrs Fan WONG, Appointed ACHS (Hong Kong) Surveyor • Dr K F WONG, Department of Pathology, Queen Elizabeth Hospital 	<p>Authority to address the increased workload and the stress faced by staff. Nevertheless, the deputations believe that the benefits brought by hospital accreditation will outweigh the costs in the long run.</p>
<ul style="list-style-type: none"> • Hong Kong Pharmacists (Public Service) Association 	<p>1. The deputations express in-principle support for hospital accreditation, but they are concerned about the heavy workload arising from the</p>

Organization / individual	Major views and concerns
<ul style="list-style-type: none"> • Hong Kong Physiotherapists Union • The Tseung Kwan O Hospital Doctors' Association 	<p>implementation of hospital accreditation. They urge the Administration to strengthen the workforce and provide financial support to public hospitals for implementing hospital accreditation.</p>
<ul style="list-style-type: none"> • Association of Hong Kong Nursing Staff • Hong Kong Nutrition Association • Tuen Mun Hospital Doctors' Association • United Christian Hospital Doctors' Association 	<ol style="list-style-type: none"> 1. The deputations acknowledge that hospital accreditation is one of the measures to improve the quality of healthcare services and patient safety. However, they cast doubt on its effectiveness in enhancing and sustaining the healthcare standard, given the current manpower stringency, insufficient communication with frontline staff and the heavy workload arising from the implementation of the accreditation exercise. They urge the Administration to improve the manpower of frontline healthcare staff. 2. The deputations opine that hospital accreditation could only be implemented with adequate manpower support and after extensive consultation with frontline staff.
<ul style="list-style-type: none"> • Alice Ho Miu Ling Nethersole Hospital Doctors' Association 	<ol style="list-style-type: none"> 1. The deputation has reservations about the effectiveness of hospital accreditation in enhancing patient care and reducing medical incidents, given the existing tight manpower, long working hours of frontline doctors and heavy workload of frontline staff in public hospitals. The additional workload arising from the implementation of the accreditation exercise will impose further pressure on the frontline healthcare staff, affecting the quality of patient care. 2. The deputation urges the Hospital Authority to defer the implementation of hospital accreditation and accord priority to address the manpower shortage problem.

Organization / individual	Major views and concerns
<ul style="list-style-type: none"> • Frontline Doctors' Union • 爭取醫生合理工時行動組 	<ol style="list-style-type: none"> 1. The deputations object to the implementation of hospital accreditation in public hospitals, as they consider that hospital accreditation cannot improve the quality of healthcare services. The deputations point out that many doctors have to reduce their consultation time with patients or clinical work in order to prepare for the accreditation exercise. Although Tuen Mun Hospital has been awarded a four-year full accreditation status, the turnover rate of doctors in its medicine specialty is high among public hospitals. 2. The deputations urge the Administration to shelve the implementation of hospital accreditation in public hospitals or defer its implementation until the problem of healthcare manpower shortage is solved. Priority should be accorded to formulating a doctor-patient ratio and standard weekly work hours for doctors.
Hospital accreditation in private hospitals	
<ul style="list-style-type: none"> • Hong Kong Private Hospitals Association • Matilda International Hospital 	<ol style="list-style-type: none"> 1. The deputations consider that the outcomes of hospital accreditation in private hospitals are positive although difficulties have been encountered during the initial period. The deputations consider that hospital accreditation can improve the quality of healthcare services and enhance accountability of private hospitals. Hospital accreditation can also promote a culture for continuous improvement in patient care and patient safety. 2. The deputations remark that hospital accreditation is an international trend in hospital development. It also promotes public-private partnership as a set of common standards for measuring the performance of public and private hospitals would be developed.

Organization / individual	Major views and concerns
Feedback on the pilot scheme of hospital accreditation	
<ul style="list-style-type: none"> • Association of Hong Kong Nursing Staff 	<ol style="list-style-type: none"> 1. As revealed from the findings of a survey conducted by the deputation on hospital accreditation in public hospitals, the implementation of hospital accreditation has increased non-clinical workload and work pressure for the nursing staff due to inadequate manpower and resources. Most respondents consider that the scheme has failed to enhance the quality of care and efficiency of public hospitals.
<ul style="list-style-type: none"> • Hong Kong Radiographers' Association 	<ol style="list-style-type: none"> 1. The deputation points out the different views on hospital accreditation held by the management and frontline staff. While the management considers that the accreditation exercise may offer a good opportunity to work with other departments to achieve a common goal, the frontline staff may not see the need to have hospital accreditation and hence show reluctance to be involved in the associated work.
<ul style="list-style-type: none"> • Hong Kong Physiotherapy Association 	<ol style="list-style-type: none"> 1. The deputation considers that not all the accreditation teams are familiar with the level of standards required, creating difficulties for the frontline staff to meet the requirements of accreditation.
<ul style="list-style-type: none"> • Professor FOK Tai-fai, SBS, JP, Faculty of Medicine, The Chinese University of Hong Kong • Professor LEE Sum-ping, Li Ka Shing Faculty of Medicine, The University of Hong Kong • 	<ol style="list-style-type: none"> 1. In the deputations' views, hospital accreditation has brought about improvements in both clinical and non-clinical areas, such as facilitating team work and inter-departmental and inter-disciplinary collaboration, and promoting a cultural change for continuous improvement.
<ul style="list-style-type: none"> • Hong Kong Association of Radiation Therapists 	<ol style="list-style-type: none"> 1. The deputation considers that the accreditation exercise could draw the attention of healthcare staff to the importance of proper documentation.

Organization / individual	Major views and concerns
	It can also improve the organizational and clinical performance through the proper management of records and documents.
<ul style="list-style-type: none"> • 31 appointed ACHS (Hong Kong) Surveyors • Dr Grace CHENG, Appointed ACHS (Hong Kong) Surveyor • Dr Alexander CHIU, Appointed ACHS (Hong Kong) Surveyor • Mr Michael LING Ho-ming, Appointed ACHS (Hong Kong) Surveyor • Dr LUI Siu-fai, Appointed ACHS (Hong Kong) Surveyor 	<ol style="list-style-type: none"> 1. The local surveyors of hospital accreditation consider that the pilot scheme of hospital accreditation has bolstered quality in domains such as clinical safety, care efficacy and patient experience. There are also improvements in the standards of disinfection, sterilization and infection control practices; modernization of care delivery processes and service delivery models; enhancement of patient safety and risk management in clinical areas; as well as improvement in end of life care.
<ul style="list-style-type: none"> • Society for Community Organization 	<ol style="list-style-type: none"> 1. Noting that representatives of patient groups have been invited to join the hospital governing committee, the deputation considers that this has provided a channel for the patient groups to express their views on hospital accreditation.
Extension of the hospital accreditation scheme to other public hospitals	
<ul style="list-style-type: none"> • Association of Hong Kong Nursing Staff • Hong Kong Association of Radiation Therapists • Hong Kong Physiotherapy Association • Hong Kong Radiographers' Association • Society for Community Organization 	<ol style="list-style-type: none"> 1. On the proposed extension of the hospital accreditation programme to another 15 public hospitals, the deputations request the Hospital Authority to strengthen the healthcare workforce, provide sufficient clerical support to alleviate the workload of frontline staff, and enhance information technology systems to relieve staff from documentation work. The Hospital Authority should also strengthen communication with frontline staff and issue clear guidelines on meeting requirements for hospital accreditation. A central database should be set up for sharing the experience of the pilot hospitals to avoid duplication of

Organization / individual	Major views and concerns
	<p>work.</p> <p>2. The deputations consider that hospital accreditation in public hospitals should be carried out by phases, so as to avoid implementation in a hasty manner.</p>
<ul style="list-style-type: none"> • 31 appointed ACHS (Hong Kong) Surveyors • Dr Grace CHENG, Appointed ACHS (Hong Kong) Surveyor • Dr Alexander CHIU, Appointed ACHS (Hong Kong) Surveyor • Mr Michael LING Ho-ming, Appointed ACHS (Hong Kong) Surveyor • Dr LUI Siu-fai, Appointed ACHS (Hong Kong) Surveyor 	<p>1. The deputations express support for the extension of the hospital accreditation programme to other hospitals. They consider that prudent planning of the accreditation exercise, more staff education, and provision of additional manpower resources will facilitate the implementation of hospital accreditation to other hospitals.</p>

<u>Name of Organization / individual</u>	<u>Submission [LC Paper No.]</u>
Association of Hong Kong Nursing Staff	LC Paper No. CB(2)2260/10-11(01)
Hong Kong Association of Radiation Therapists	LC Paper No. CB(2)2307/10-11(02)
Hong Kong Occupational Therapy Association	LC Paper No. CB(2)2307/10-11(06)
Hong Kong Pharmacists (Public Service) Association	LC Paper No. CB(2)2239/10-11(10)
Hong Kong Physiotherapy Association	LC Paper No. CB(2)2239/10-11(04)
Hong Kong Radiographers' Association	LC Paper No. CB(2)2307/10-11(01)
The Pharmaceutical Society of Hong Kong	LC Paper No. CB(2)2239/10-11(08)
Society for Community Organization	LC Paper No. CB(2)2307/10-11(03)
The Society of Hospital Pharmacists of Hong Kong	LC Paper No. CB(2)2239/10-11(03)
The Tseung Kwan O Hospital Doctors' Association	LC Paper No. CB(2)2307/10-11(04)
31 appointed ACHS (Hong Kong) Surveyors	LC Paper No. CB(2)2239/10-11(06) (Joint submission)
Mr CHAN How-chi, Hospital Governing Committee of the Tuen Mun Hospital and Regional Advisory Committee of Hospital Authority	LC Paper No. CB(2)2239/10-11(07)
Dr Grace CHENG, Appointed ACHS (Hong Kong) Surveyor	LC Paper No. CB(2)2239/10-11(06) (Joint submission)

<u>Name of Organization / individual</u>	<u>Submission [LC Paper No.]</u>
Dr Alexander CHIU, Appointed ACHS (Hong Kong) Surveyor	LC Paper No. CB(2)2239/10-11(06) (Joint submission)
Dr Anne LEE, Department of Clinical Oncology, Pamela Youde Nethersole Eastern Hospital	LC Paper No. CB(2)2307/10-11(05)
Professor FOK Tai-fai, SBS, JP, Faculty of Medicine, The Chinese University of Hong Kong	LC Paper No. CB(2)2260/10-11(02)
Professor LEE Sum-ping, Li Ka Shing Faculty of Medicine, The University of Hong Kong	LC Paper No. CB(2)2239/10-11(09)
Mr Michael LING Ho-ming, Appointed ACHS (Hong Kong) Surveyor	LC Paper No. CB(2)2239/10-11(05) LC Paper No. CB(2)2239/10-11(06) (Joint submission)
Dr LUI Siu-fai, Appointed ACHS (Hong Kong) Surveyor	LC Paper No. CB(2)2239/10-11(06) (Joint submission)
Mrs Fan WONG, appointed ACHS (Hong Kong) Surveyor	LC Paper No. CB(2)2307/10-11(07)
Dr K F WONG, Department of Pathology, Queen Elizabeth Hospital	LC Paper No. CB(2)2260/10-11(03)