

For Discussion
on 19 April 1999

Accreditation of Private Hospitals

Background

At the meeting of the LegCo Panel on Health Services in November 1998, the monitoring of private hospitals was discussed and Members suggested that the accreditation of private hospitals be explored as an additional means to monitor the quality of service provided in private hospitals. The Department of Health has followed up this suggestion and examined the issues involved. This paper reports on the present progress.

Present local internal and external quality assurance programmes

2. At present, all private hospitals have set up self-regulatory committees to plan and monitor various areas of service, such as infection control, complaints and discipline, service development, education and safety precautions. In addition to these, some hospitals have obtained accreditation for quality assurance programme of the Hong Kong College of Obstetricians and Gynaecologists and Hong Kong College of Pathologists.

3. A number of private hospitals are seeking an independent third party quality management system certification service according to ISO

9002 which involves the setting up of service standards by the participating organisation and assessment by a Certification Agency.

Hospital Accreditation

4. Hospital/Service accreditation is an established method developed overseas to address the quality of health services. Under an accreditation system, a health facility voluntarily seeks independent bench-marking of its services against recognised professional standards. It differs from registration in that it is not a statutory but a voluntary system.

5. Essentially, all accreditation systems share some common features. An accreditation board is constituted of professionals, government officials and consumers who set standards on quality of services. Such a board is usually independent from the government and is self-financing. Participating hospitals are evaluated against a set of standards devised by a team of trained surveyors at a prescribed fee at regular intervals. Those who fulfil the standards are awarded accredited status which is valid for a number of years. Survey reports are published for reference of health authorities and consumers. Participation of hospitals is voluntary and reflects the commitment of the hospitals towards providing quality care to their clients. This is fundamental to the philosophy of accreditation.

6. A few countries have developed their own accreditation system. The well established authorities are the Joint Commission on Accreditation of Healthcare Organisations (JCAHO) of the United States,

Australian Council on Health Care Standards and Canadian Council on Hospital Accreditation. The Joint Commission International is a subsidiary of the JCAHO which plans to offer accreditation services to health institutions internationally by late 1999.

Factors for Consideration

7. In determining how to take the matter further, the following factors have been considered: -

(I) Licensing versus accreditation

According to overseas experience, licensing and accreditation are two separate mechanisms. Hospital accreditation has not been used to substitute licensing. The objective of the existing local licensing system for private hospitals is to ensure that such institutions have appropriate accommodation, staffing and equipment with respect to the nature and scope of services provided therein. Private hospitals should still be licensed so long they meet the necessary requirements of operating a hospital irrespective of whether they have been accredited or not. We do not propose to change this arrangement.

(II) Voluntary versus compulsory participation

The spirit of accreditation is voluntary. By voluntarily seeking accreditation, the hospital demonstrates a willingness to have the quality of the care that it provides to the public be independently evaluated and improved. It provides an opportunity for institutions

to improve standards and quality of care. Consumers can make informed choice taking the accreditation status of hospitals as reference. We propose that all private hospitals should be encouraged to join accreditation programmes so that these institutions can update their knowledge in the current state of art of quality hospital services and make efforts towards achieving accreditation. It is noted that purchasers of hospital services and insurance companies in some countries will only reimburse medical fees for patients using hospitals that are accredited and this serves as an incentive for hospitals to participate in such programmes.

(III) Purchase of service from established agencies versus setting up local accreditation bodies

At present, there is no established independent agency to accredit hospital service in Hong Kong. Some local private hospitals are exploring to seek accreditation from overseas agencies. There are problems related to the purchase of services from overseas agencies, namely, the costs, the applicability of overseas standards on local hospitals and the choice of agencies. Another option is to set up a local independent body, but again, a number of problems will have to be addressed, such as the setting of local standards and training of survey teams. The financial viability of such a body to be supported by such a small number of local private hospitals will need to be considered, Furthermore, a long lead time would be required to set up such a centralised accreditation body. We consider that the purchase of services from overseas agencies remains a feasible option to pursue in the intermediate term.

Way forward

8. We propose that the accreditation system should be introduced on a voluntary basis, and since there will be a long lead time in setting up a local accreditation body, the private hospitals should be encouraged, in the mean time, to pursue accreditation from overseas accreditation body. The Department of Health would follow up with the private hospitals on this matter.

Health and Welfare Bureau

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