



廣華醫院
Kwong Wah Hospital



25 June, 2011

To: Secretary, Health Panel,
Legislative Council.

Dear Sir/Madam,

Special meeting on Hospital Accreditation in Public Hospitals

1. Quality and Safety are important and should be ensured in hospital services

The hospital is a place where sick people are being treated. The best available equipment, drugs, and skills should be used. QUALITY is the first most important element of a good service. The hospital operations nowadays depend on multidisciplinary approach, with state-of-the-art technology. It is a complex process. Anything going wrong will harm the patients. SAFETY is equally important. Quality and Safety should be ensured.

2. Hospital Accreditation is an appropriate tool to standardize Quality and Safety

During the past two decades hospitals in Hong Kong have embarked on a journey of continuous quality improvement and risk management. Nevertheless, the pace and the stage attained differ among hospitals and even within different departments of a hospital. It is necessary to have an open and uniform means of measurement to reflect on any deficiencies and to share best practices. Hospital Accreditation is a very useful tool for such purpose. Developed countries such as the U.S.A., Australia, Singapore have been using Accreditation to affirm the achievement of quality and safety of their hospitals. In Hong Kong, several private hospitals have implemented Hospital Accreditation since the last decade with success. It is unquestionably the path to take for all the healthcare institutions in Hong Kong.

3. Impact of the accreditation survey on daily work could be reduced

While many hospitals are already conducting improvement projects every day, the event of accreditation survey inevitably introduces anxiety and pressure on the hospital staff. It should be emphasized that the survey is neither an examination, nor is it a one off exercise. Hospital staff should not have spent an overwhelming effort in preparing for the survey. More

education should be provided to the hospital staff as to how to prepare for the survey more efficiently without over-doing it. I believe as hospitals get used to the survey, and with the sharing of experience from the pilot hospitals, the pressure and fear of the survey by the staff could be managed.

4. Extra workload and manpower should be addressed

A majority, but not all, of the quality improvement initiatives could be achieved with existing manpower. However, adequate resources in terms of extra equipment and manpower should be provided, not just for the sake of preparing for accreditation, but also for routine improvement work. For example, as more guidelines are being established to ensure safety and quality, more time will be spent by the staff to implement these guidelines. Public hospital is facing an increasing workload and operational complexity. Therefore additional manpower is needed, with or without hospital accreditation.

5. Leverage to be created by the Hospital Authority

Since public hospitals will be going through the same journey of accreditation, leverage could be created by the Hospital Authority in the form of central support in many areas, such as information technology in documentation, sharing of quality initiative and safety solutions, alignment of practices, etc. This will eliminate the need for re-inventing the wheels by individual hospitals and make the accreditation process much smoother.

6. Road map of the accreditation could be reviewed but should not abandoned

The pilot hospitals have successfully started the accreditation cycle with obvious benefit. Much experience have been acquired which could be shared with other hospitals. The strategies for further rolling out the hospital accreditation should be review and revised. I believe the road for accreditation is in the right direction. The pace could be adjusted, but the destination should not be abandoned.

Sincerely,



Michael Ling
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