



**Service Priorities and Programmes**  
**Electronic Presentations**

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**Creating a professional learning community through hospital accreditation**

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**Introduction**

Hospital accreditation aims to enhance quality of health care service by building up a continuous quality improvement culture in hospitals. It also promotes the emergence of a professional learning community and facilitates full staff engagement. 5-P strategies were formulated to lead hospital accreditation journey in M&G department at PMH.

**Objectives**

It aims to create alongside with hospital accreditation a professional learning community comprising staff members from multiple levels and disciplines who share common and agreed vision and values and work collaboratively and continually together for betterment of organization.

**Methodology**

5-P strategies provide a dynamic easy-to-understand framework and common platform for communication, and create an organizational plan for staff engagement and deployment. People: M&G Hospital Accreditation Criteria Workgroup was established to lead hospital accreditation and 5-P strategies. To cultivate leadership and ownership, major duties included formulation of action plan, description and allocation of duties, tapping of internal and external resources through participation from every ward stakeholder. Places: Resources Management Workgroup was established to make safe and effective use of environment and equipment that led to better health care quality. Major duties included managing zone categorized environment of care, maintenance and systematic colour-coded storage and minimized and paper-less stocking medical record. Policies: To address quality-driven approach, Policy and Documentation Preparation Workgroup was established to extract policies, revise procedures, prepare M&G handbook and align line-to-take to assure safety management in all clinical wards. Programs: To motivate the voluntary effort and cognitive thought to enhance successful changes, Staff Training Workgroup was established to conduct staff training programs to familiarize all levels of staff with the criteria of every ACHS standard and their roles and responsibilities. Processes: To promote safety climate, Monitoring and Evaluation Workgroup was established to reorganize departmental website, simplify nursing care plan, design clinical audit system, analyze the near-miss and incident cases through AIRS and report KPI with

CQI projects promulgated on standardized ward notice boards.

**Result**

Over a period of five months, 340 staff attended ACHS training programs, a vigorous clinical audit cycle was implemented and a resourceful M&G handbook was prepared. Major strengths and areas of improvements were identified and follow-up measures were taken. 5-P strategies were adopted as easy-to-follow strategies for hospital accreditation resulting in successful establishment of professional learning community and coordinated staff engagement with improved job satisfaction, which had been reflected in surveyors' comment in gap analysis exercise.