

	Hong Kong Institute of Clinical Psychologists Limited 香港臨床心理學家公會有限公司	Document No.	HKICP-ADM-GL-004-R1
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	Guideline on Continuous Quality Improvement (CQI) of Hong Kong Institute of Clinical Psychologists Limited	Review Date	24/04/2026
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Guideline on Continuous Quality Improvement (CQI) of Hong Kong Institute of Clinical Psychologists Limited

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(Distribution list: This Policy should be read by all staff and members of HKICP, Professional Council and its committees, and the general public.)

1. Objectives

- 1.1 Continuous Quality Improvement (CQI) aims to increase the acceptability, efficiency and effectiveness of activities and services delivered, and to provide added benefits to the Hong Kong Institute of Clinical Psychologists Limited (HKICP), its staff, registrants and stakeholders, service users and the public. It is a step towards a strengthened registration system and clinical psychology services in Hong Kong.
- 1.2 The key objectives of this guideline are as follows:
 - 1.2.1 Develop an effective and integrated institute-wide quality improvement framework;
 - 1.2.2 Demonstrate HKICP's commitment to improving the outcomes of care and service delivery;
 - 1.2.3 Support different committees, staff and registrants of HKICP to participate in CQI activities; and
 - 1.2.4 Provide orientation and ongoing education about CQI.

2. Scope

- 2.1 This guideline prescribes the actions and processes taken by HKICP for CQI activities. It is to be used in conjunction with the Policy on Risk Management of Hong Kong Institute of Clinical Psychologists Limited (HKICP-ADM-PO-003).
- 2.2 This guideline applies to HKICP and committees under HKICP, staff and registrants of HKICP.

3. Definition

Quality improvement is a process of systematic and continuous actions that lead to measurable improvement in activities and services delivered by HKICP as well as clinical psychology services provided to the public.

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4. Roles and Responsibilities

4.1 HKICP

The HKICP maintains a CQI Framework and ensures that the standardized and necessary processes and procedures are carried out in a timely manner. The framework comprises guideline, structure and accountability.

4.2 Professional Council

4.2.1 The Professional Council ensures that guidelines addressing CQI are consistent with relevant legislation, requirement of Accredited Registers Scheme of the Department of Health, HKICP's standards, guidelines and/or codes of practice, and support HKICP's vision, values and strategic direction, and are readily available to staff and registrants of HKICP.

4.2.2 CQI will be a standing item in the agenda of Council meetings.

4.3 Education and Professional Standards Committee

4.3.1 To develop, document and implement an integrated, institute-wide CQI Framework.

4.3.2 To identify key CQI objectives both at the institute and the clinical levels in the annual planning. The Education and Professional Standards Committee would make reference to the Risk Register in identifying key CQI objectives in the planning.

4.3.3 To evaluate the effectiveness of the CQI Framework and its component activities to ensure improvements are made as required.

4.3.4 To provide orientation and ongoing education to HKICP staff, committee members and registrants about the institute-wide CQI Framework and their responsibilities for CQI.

4.3.5 To support HKICP staff, committees and registrants in identifying and responding to opportunities to improve the quality of care and service delivery. This will be done through providing orientation and ongoing education as well as annual invitation to hand in CQI plans through the use of Continuous Quality Improvement Plan (Appendix).

4.3.6 To report the outcomes of the CQI initiatives to HKICP staff, registrants, stakeholders, service users and the public, through means such as meetings, emails, newsletter and website.

4.3.7 CQI will be a standing item in the agenda of the Education and Professional Standards Committee meetings.

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4.3.8 To make reports and recommendations to the Professional Council on matters of 4.3.1 to 4.3.6 and any other matters as delegated by the Professional Council.

4.4 Other standing committees

4.4.1 To manage matters relating to CQI relevant to their respective areas of oversight.

4.4.2 To propose, implement and monitor CQI initiatives and periodically report the progress to the Education and Professional Standards Committee.

5. Continuous Quality Improvement Framework

5.1 HKICP's CQI Framework consists of a set of systematic and consistent processes in which changes are adopted for improvement. The HKICP adopted the plan-do-study-act (PDSA) cycles in an attempt to drive such improvements.

5.1.1 **Plan:** plan a change or test aimed at improvement

5.1.1.1 Identify objective

5.1.1.2 Identify questions and predictions

5.1.1.3 Plan to carry out the cycle (who, when, where)

5.1.2 **Do:** carry out the change or test

5.1.2.1 Execute the plan

5.1.2.2 Document problems and unexpected observations

5.1.2.3 Begin data analysis

5.1.3 **Study:** examine the results

5.1.3.1 Complete the data analysis

5.1.3.2 Compare data to predictions

5.1.3.3 Summarize what was learnt

5.1.4 **Act:** adopt the change, abandon it or run through cycle again

5.1.4.1 What changes are to be made?

5.1.4.2 What will the next cycle entail?

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- 5.2 As documentation is crucial in the process of CQI, the PDSA cycles would be documented in the Quality Improvement Plan (Appendix) to support local learning and transferability of learning.

6. Reference Documents

- 6.1 The Australian Council on Healthcare Standards (ACHS), The ACHS EQulP6 Guide, Part 2 – Accreditation, standards, guidelines. 2016, Sydney, Australia.
- 6.2 Taylor MJ, McNicholas C, Nicolay C, et al. (2014). Systematic Review of the application of the Plan-Do-Study-Act method to improve quality in healthcare. *BMJ Quality & Safety*; 23: 290–298.

7. Attachment

Appendix: Quality Improvement Plan

