

Concept of Quality and Accreditation

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What is Quality?

- **Quality:** The degree of excellence, extent to which an organization meets clients' needs and exceeds their expectations.
- **Healthcare Quality:** The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge (IoM)
- **Healthcare Quality:** attribute of healthcare based on knowledge (humanity, sociology, science & technology), professional virtue and ethics, that properly response to need and expectation of people and society. (Thai)



Dimension of Quality

	WHO	IoM	Aus	Can	OECD
Acceptable/patient centered	✓	✓	✓	✓	✓
Accessible	✓		✓	✓	
Appropriateness			✓		
Capability			✓		
Continuity				✓	
Effectiveness	✓	✓	✓	✓	✓
Efficiency	✓	✓	✓	✓	
Equity	✓	✓	✓		
Responsiveness/Relevance			✓	✓	
Safety	✓	✓	✓	✓	✓
Timeliness		✓	✓		✓
Work-life balance				✓	



The Most Common Approaches to Quality Improvement

- Business process re-engineering
- Collaborative
- Lean
- PDSA
- Six Sigma
- Statistical process control
- TQM/CQI



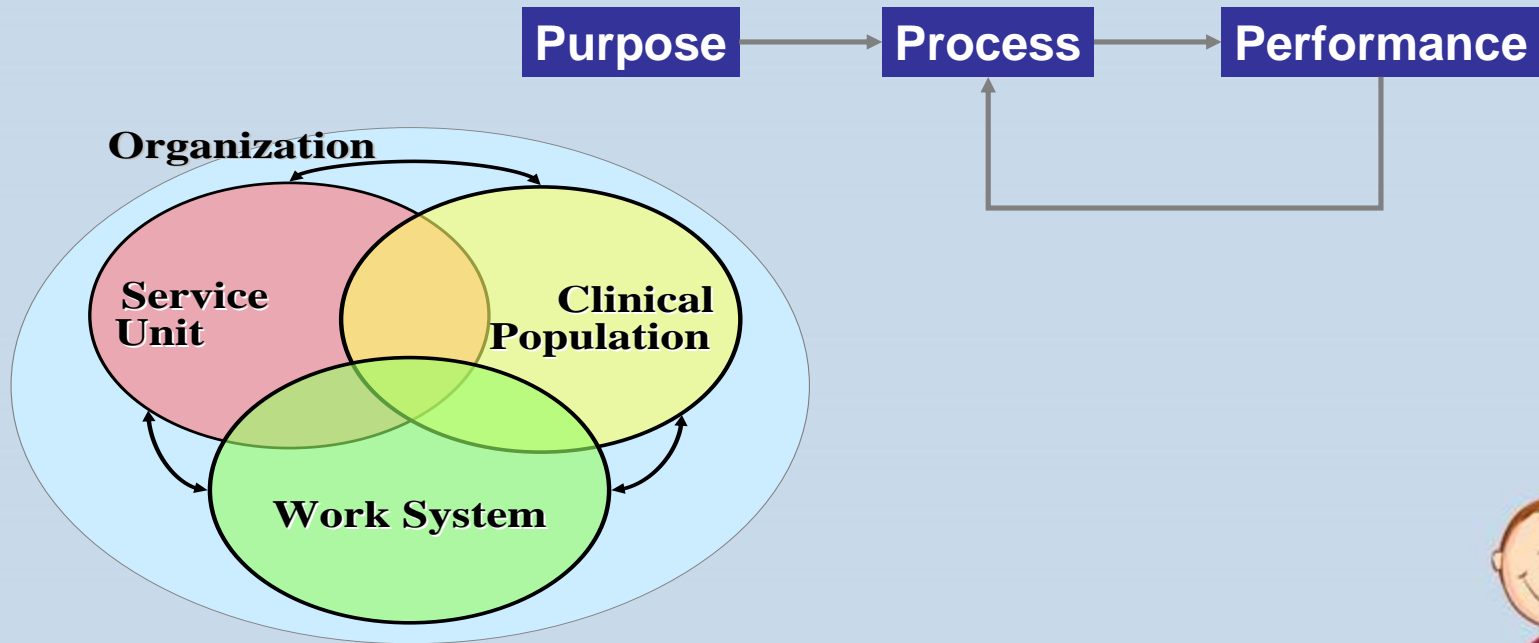
Some Common Principles of Quality Improvement

1. Data and **measurement** for improvement
2. Understanding the **process**
3. Improving **reliability**
4. Demand, capacity and **flow**
5. Enthusing, involving and engaging **staff**
6. Involving **patients** and co-design

(The Health Foundation)



3P: Basic Building Block for Quality Improvement



**How do we do our work?
For what purpose?**

Key Process /
Value Creation Process

Purpose of the Process
Process Requirement
Process Design

Process Indicator

How well can we do?

Performance
Measurement

Quality Review/
Adverse Event

Customer
Need

Key Quality Issue

Outcome Indicator

Evidence
Prof. Require

Purpose

Process

Performance

Why do we exist?

Upper Level
Policy

Performance
Analysis & Review

Priority for
Improvement

CQI / Process Improvement
Performance Improvement
Innovation
KM/Benchmarking
Research & Development

How can we improve?



Clinical Governance

‘a system through which all of the organizations in the health system are accountable for continuously improving the quality of their clinical services and ensuring high standards of patient care by creating a facilitative environment in which excellence will flourish’



The Temple Model Of Clinical Governance

Patient – Professional
Partnership

Risk Management
Effectiveness

Communication
Effectiveness

Strategic
Effectiveness

Clinical
Effectiveness

Patient
Experiences

Resource
Effectiveness

Learning
Effectiveness

Systems
Awareness

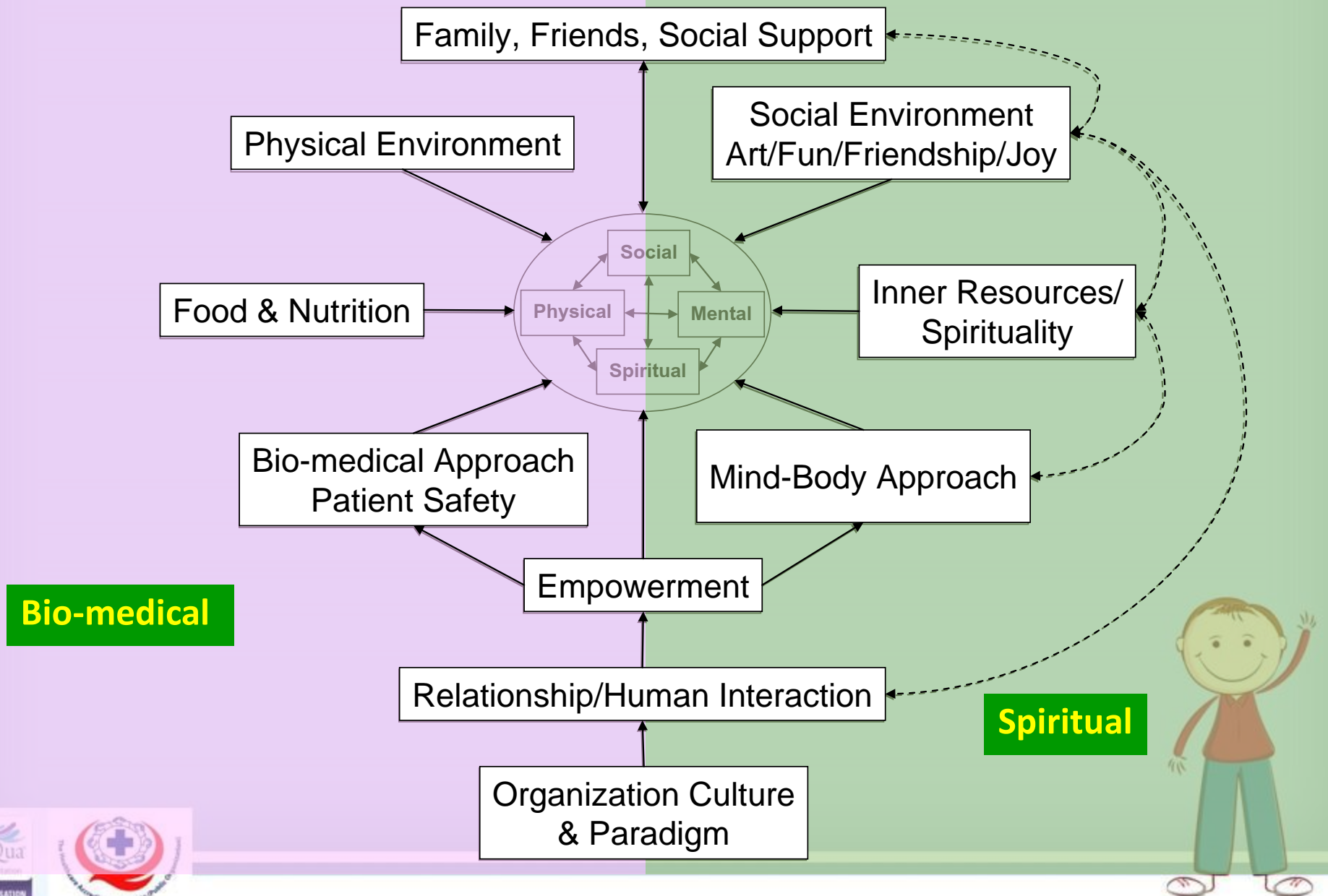
Teamwork

Communication

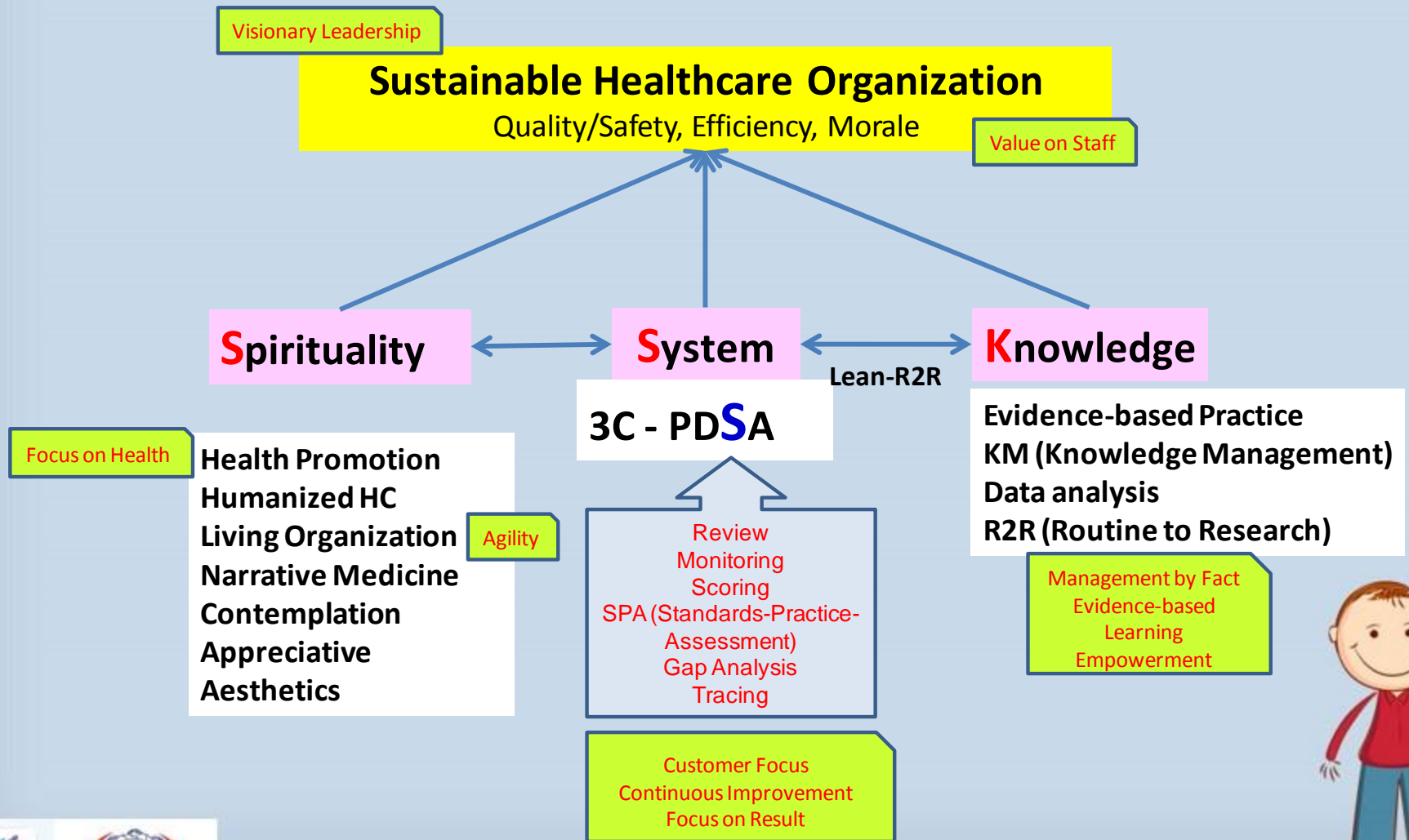
Ownership

Leadership

Balance of Bio-medical & Spiritual



3 Streams of Development



Role of the Board

- Develop a corporate quality strategy with output goals that are reported on a regular basis
- Ensure that QI approaches are seen through the patient's eye, the whole of the patient's journey
- Clarity of measures for accountability, comparability, improvement
- Bring safety and quality alive through patient stories
- Make sure that executives take part in structure walkrounds
- Embed quality in cost improvement initiatives

(The Health Foundation)



Accreditation

“A public recognition of the achievement of accreditation standards by a healthcare organisation, demonstrated through an independent external peer assessment of that organisation’s level of performance in relation to the standards.”

(Charles D Shaw)



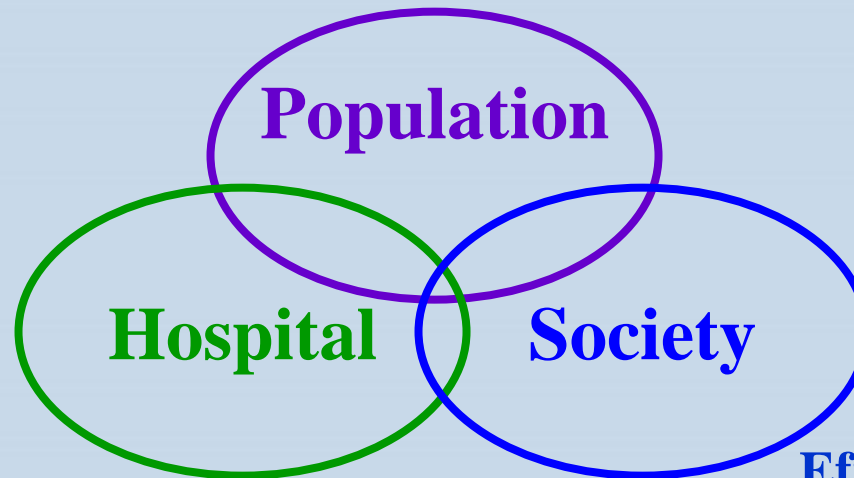
Potential Impact of Accreditation

- Health system governance
- System design development
- System financing
- Population health
- Knowledge management, transfer
- Clinical effectiveness
- Consumer empowerment and decision-making
- Professional and personal development
- Management development
- Quality systems development



Possible Benefits of Quality Improvement

Satisfaction
Safety
More Responsive
Patient's Right Protection
Holistic care & Health Promotion



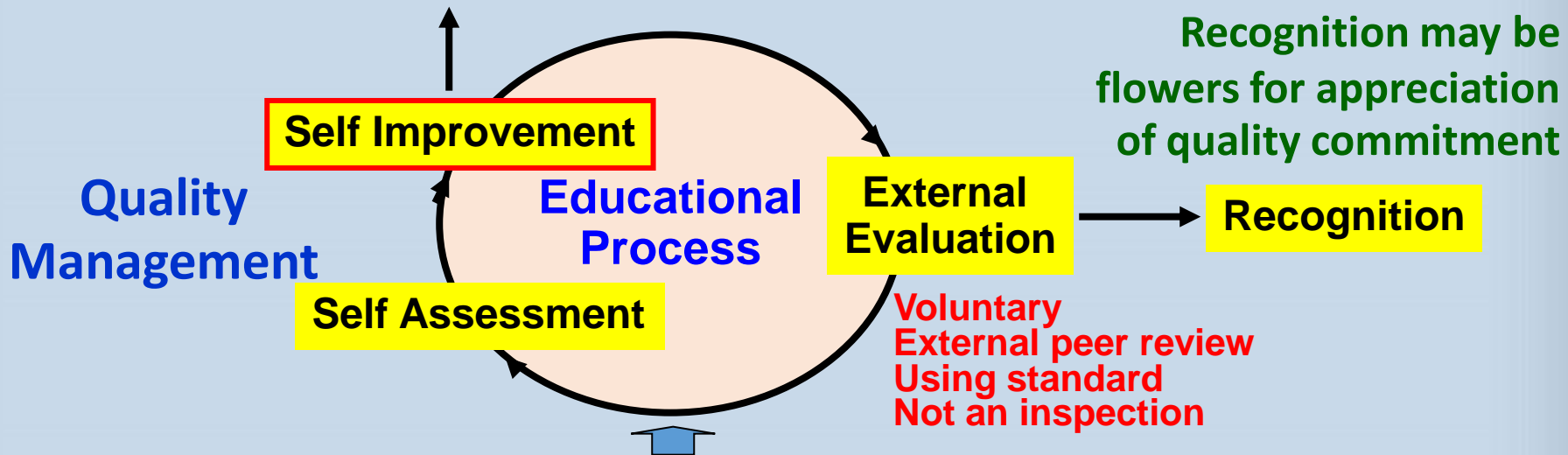
Reputation
Accountability
Good Governance
Professional Practice (less lawsuit)
Knowledge-based Org.
Commitment & Participation
Financial Incentive

National Indicator
Public Participation
Consumer Protection
Access to Quality Care
Efficient Use of Resources



Thai Hospital Accreditation Program

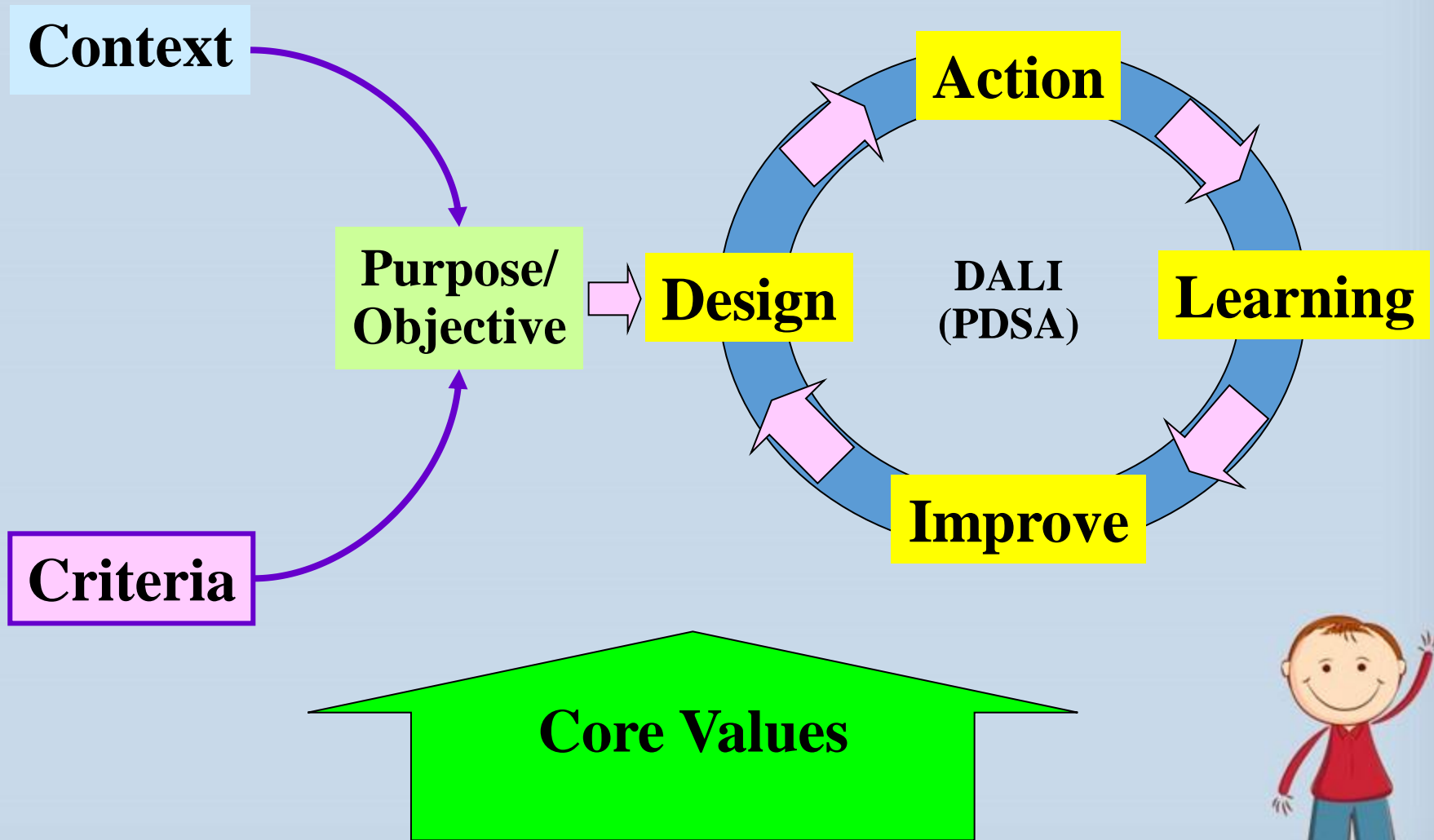
Safety & Quality of Patient Care



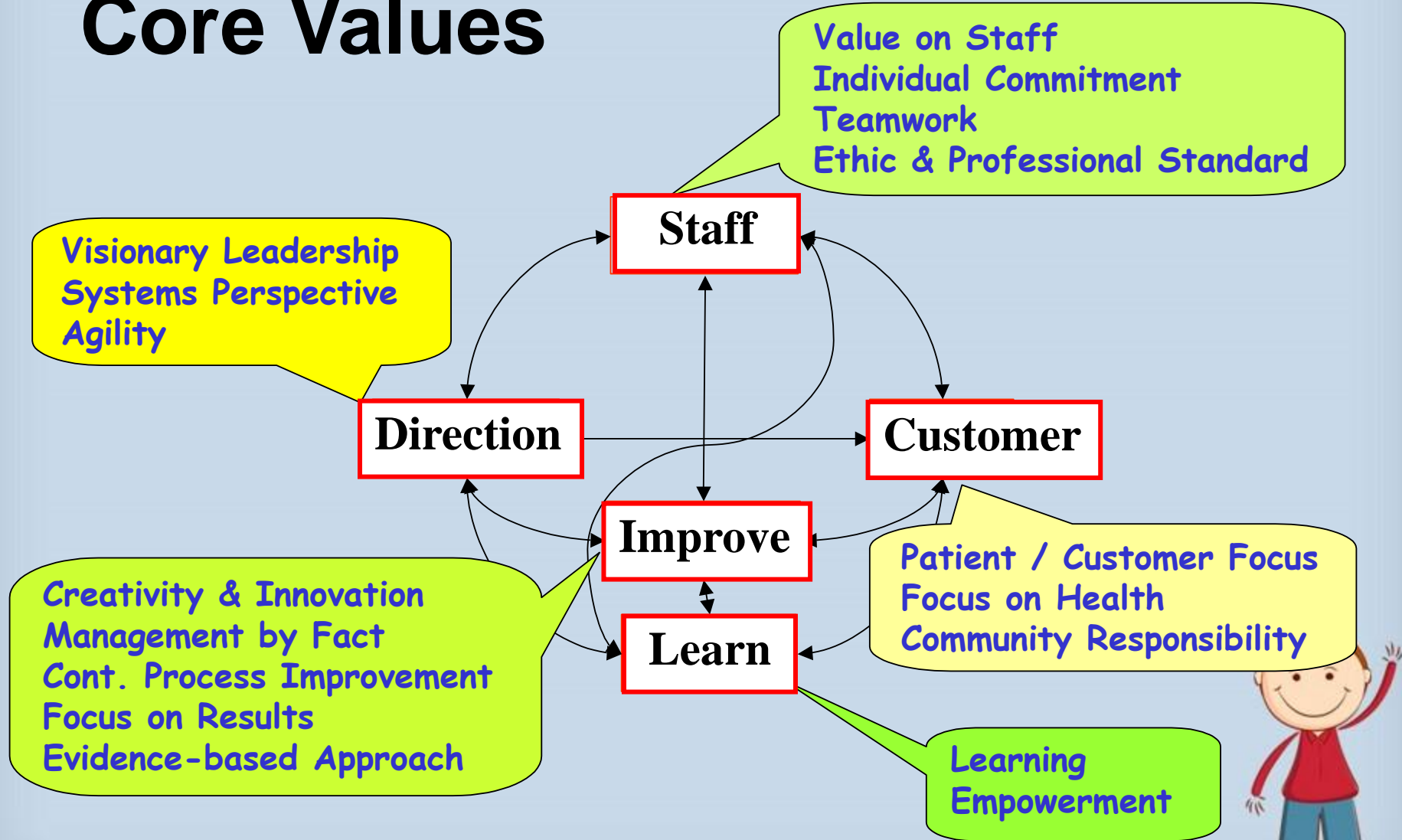
Core Concepts:
Flexible, context oriented
System approach, integration
Positive approach
Evaluation to stimulate improvement
Special character of healthcare
(uncertainty, autonomy & accountability)



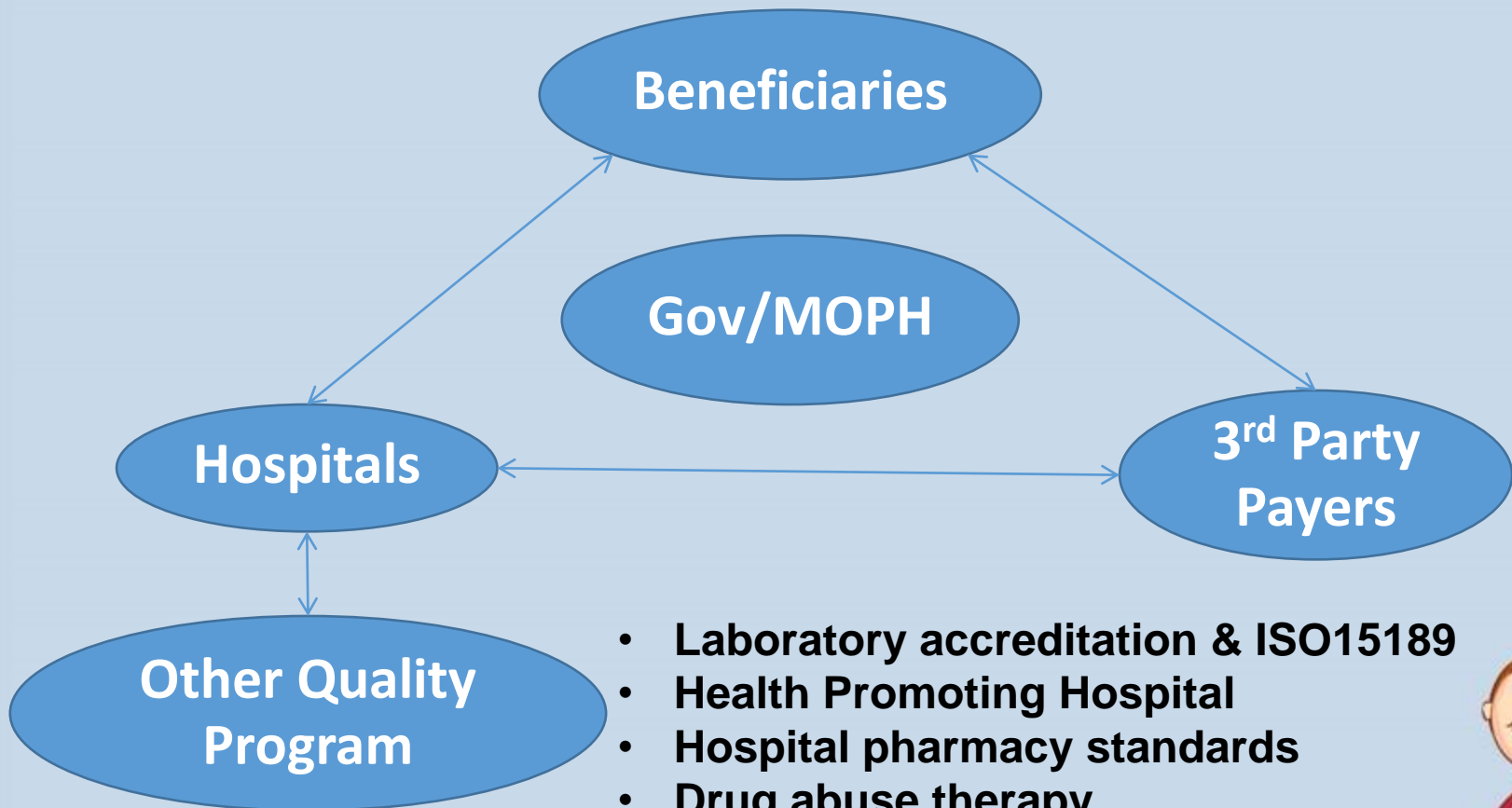
3C-PDSA for Performance Excellence



Core Values



Collaboration of HA with Key Stakeholders & Other Programs



- Laboratory accreditation & ISO15189
- Health Promoting Hospital
- Hospital pharmacy standards
- Drug abuse therapy
- HIV program
- Tobacco cessation program



How to Move the Elephants

1. Start with R & D
2. Power of Recognition
3. Stepwise Approach
4. Integrate with the others & existing initiatives
5. Move the whole organization
6. Multiple tools
7. Forum for campaign & sharing
8. Humanized Healthcare
9. Living Organization
10. Collaboration with the professional organization
11. From “Training” to “Doing & Learning”



HA Program Innovation

Year	Innovation	Description
2004	Stepwise recognition	To encourage continuous improvement for hospitals with different potential.
2004	3C-PDSA	Simplify concept of TQA/MBNQA into practice.
2006	Standard integration	Integrate HA, HPH, basic TQA criteria into a single standard.
2006	Scoring guideline	Promote continuum of compliance, improvement, & excellence.
2008	PSGs: SIMPLE	Promote common direction of evidence-based safety practice.
2008	THIP (compare KPI)	Use comparative KPI to drive improvement.
2009	Spiritual HA (SHA)	Promote spiritual dimension of healthcare & org. management.
2009	Spirituality mining	Story telling, narrative medicine, short movies.
2009	SPA	Guidelines for implementing HA Standards.
2010	Peer Network & 6 Tracks	Encourage local peer assist for implementing HA Standards.
2012	Provincial KM	A joyful environment to identify OFI by peers.
2012	CoP high risk care	Create awareness, network, & capture tacit knowledge.
2013	SPA in Action	Ask WHAT to get insight of hospitals' own problems.



Some Key Success Factors

- Make it easy and fun for everyone
- Go together, don't left someone behind
- Don't hurry to use pass/fail decision, use appreciation at the beginning
- Use peer assist (e.g. local hospitals visit each other) and sharing
- Integrate all concepts and tool of improvement into practice

