Thailand's Quality Improvement Journey

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The Hospital Accreditation Institute

Under the governance of the Health Systems Research Institute

Collect & Create Knowledge/ Guideline for Quality Improvement

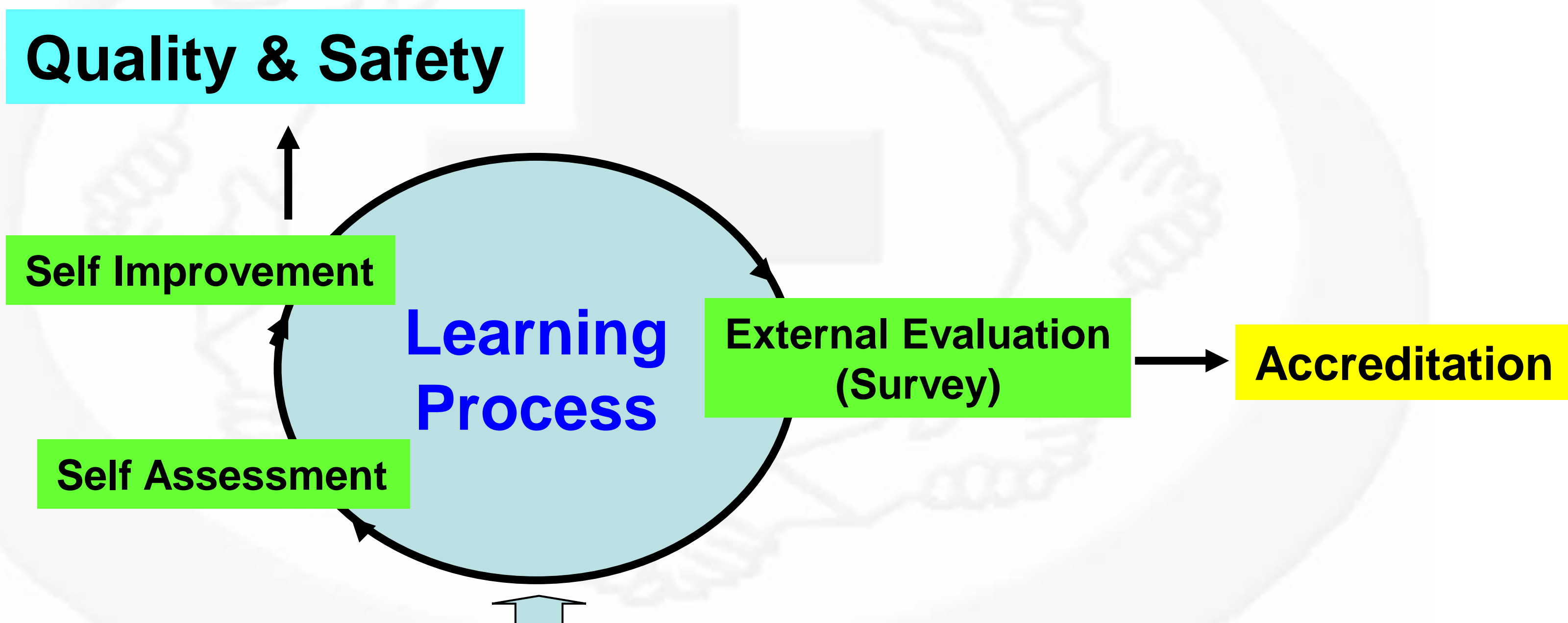
Evaluation & Accreditation

Create Awareness
Knowledge Dissemination
Training

Stepwise Recognition

Collaboration/Learning Network

Basic Concept of Hospital Accreditation



Core Values & Concepts:
- HA as a Learning Process
- Patient & Health Focus
- Continuous Improvement

Development of QI & HA Program in Thailand

CHIA HA

Under Health Systems Research Institute

HA Project (R&D) — Standard Implementation & Compliance Assessment

Standard — Review Concept & Requirement (US, Canada, Australia, UK)
Seek Opinion from Stakeholders (Delphi)

Hosp. Assess (SSO) — Assessment Experience

TQM/CQI — Improvement Tools

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Start Accreditation as R & D

Voluntary Process
Educational Process, Not Inspection
Encourage Civil Society Movement
Self Reliance, Independence, Neutral
Emphasis Self Assessment & Improvement

HA Project

Pilot Hospitals

Organization Alignment
Multidisciplinary Team
Med Staff Org
Clinical Quality
Risk Management
Self Assessment
Internal Survey

Initiatives

Workshops

Consultants

Adapt
Seek more information
Creativity
Trial
Learn

Knowledge

Solutions

Questions

Power of Recognition

- Willingness to open their house
- High level of collaboration, at least temporarily
- Positive reinforcement
- More friendly than top-down policy
- No one want to stay behind
- Make the impossible possible
- Any level of achievement can be recognized

Development of HA

HA Institute

- Trigger
- New Standard
- Clinical Tracer
- HPH Project
- 3 Steps to HA

Under Health Systems Research Institute

- HA Project (R&D)
- Standards
- Hosp. Assess (SSO)
- TQM/CQI

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3 Steps to HA

Step 3: Quality Culture
Identify OFI from standards
Focus on integration, learning, result

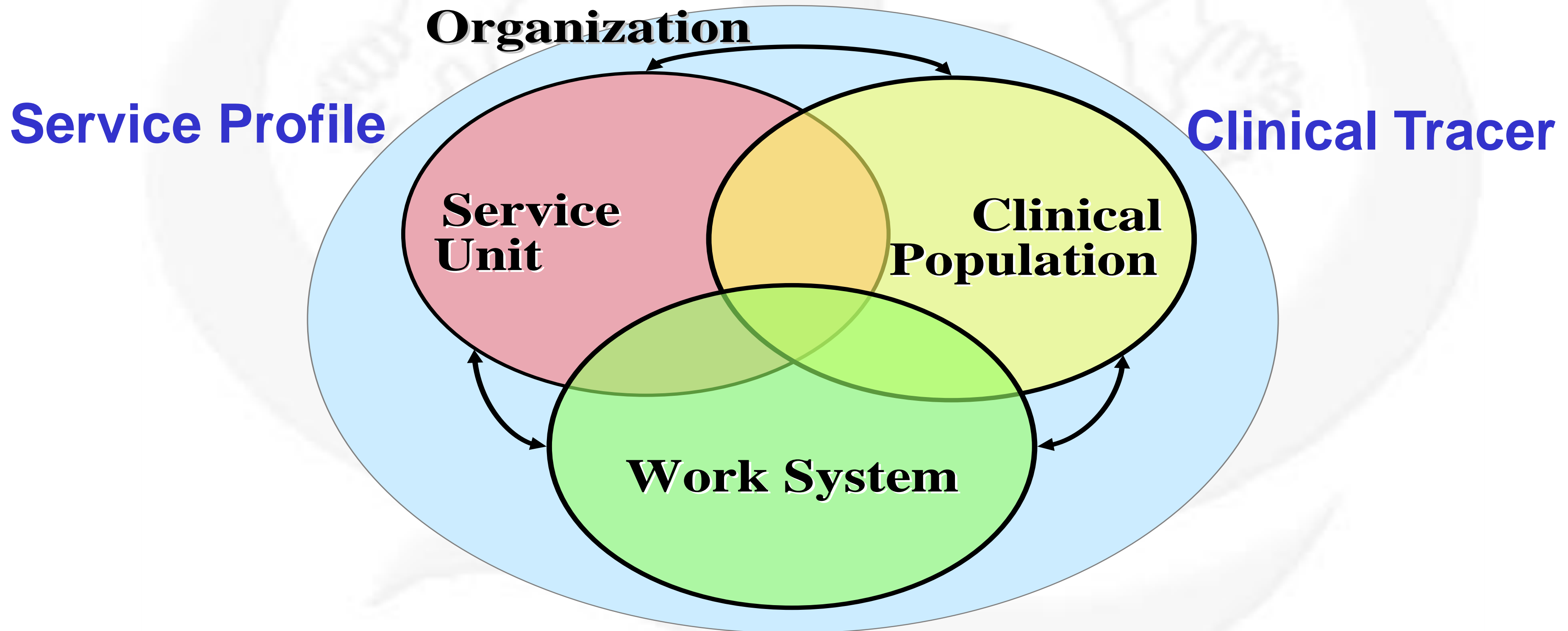
Step 2: Quality Assurance & Improvement
Identity OFI from goals & objectives of units
Focus on key process improvement

Step 1: Risk prevention
Identify OFI from 12 reviews
Focus on high risk problems

Number of HA Recognition

Move the Whole Organization

3P : Purpose – Process -Performance



Clinical Tracer as a Self Assessment Tool To Improve Clinical Practice

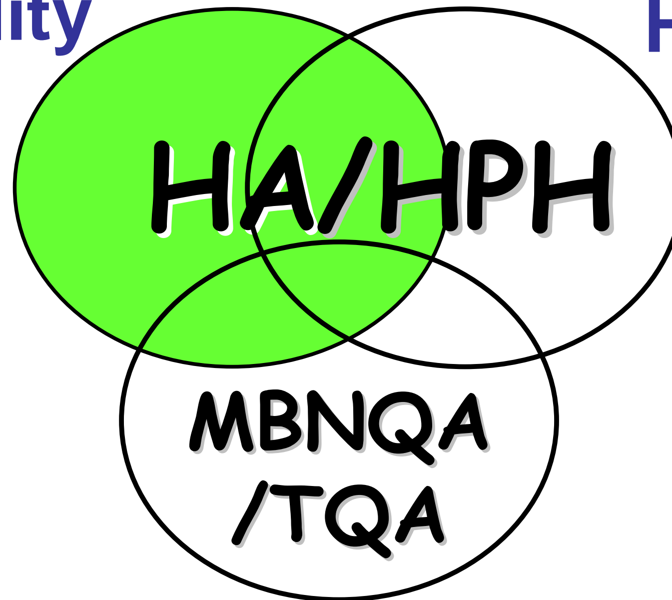
Context
Key Issues
Objectives
1. Trace Quality Process
2. Trace Care Process
3. Trace Relevant Systems
Indicators
Monitor Results
Opportunity For Improvement
Clinical Practice Improvement

Similar concept to disease specific accreditation & Value Stream Mapping in lean thinking

Integration of Health Promotion and Performance Excellence into HA Standards 2006

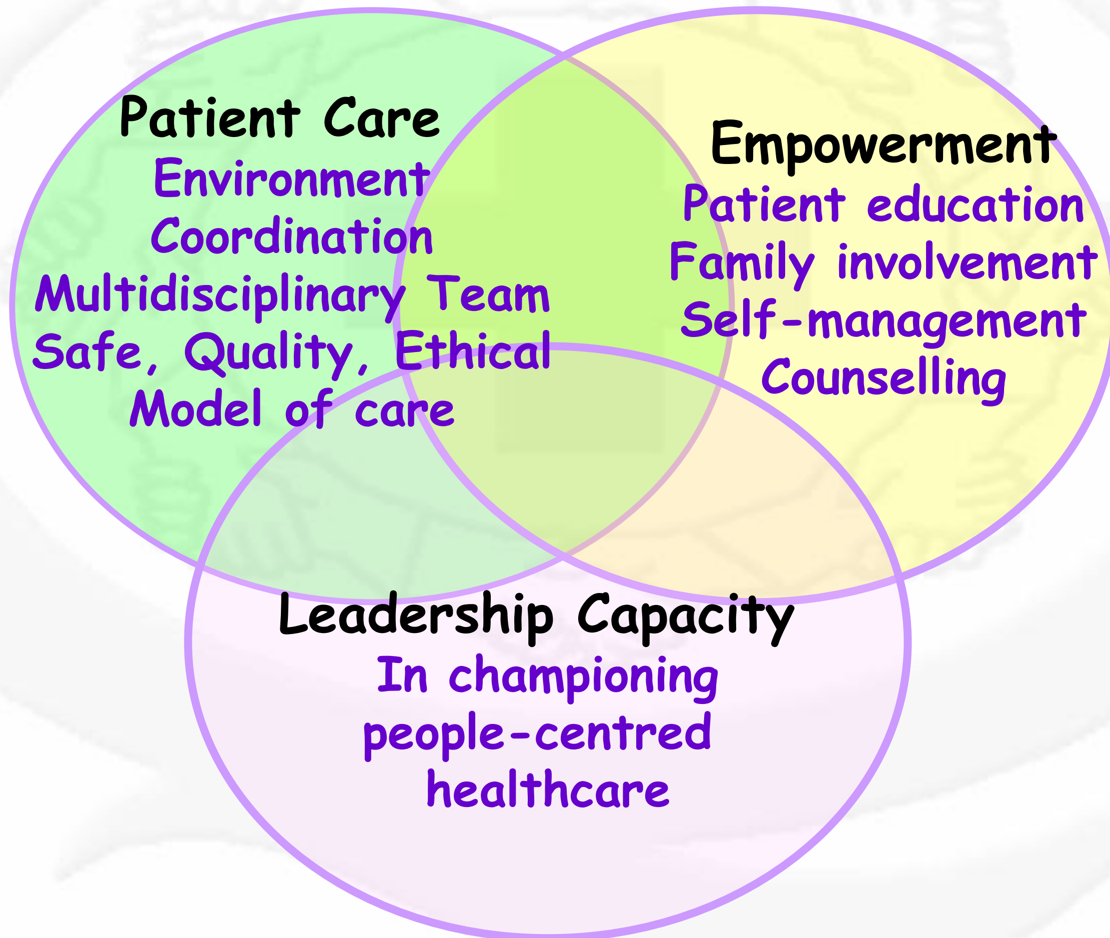
Safety & Quality

Health Promotion



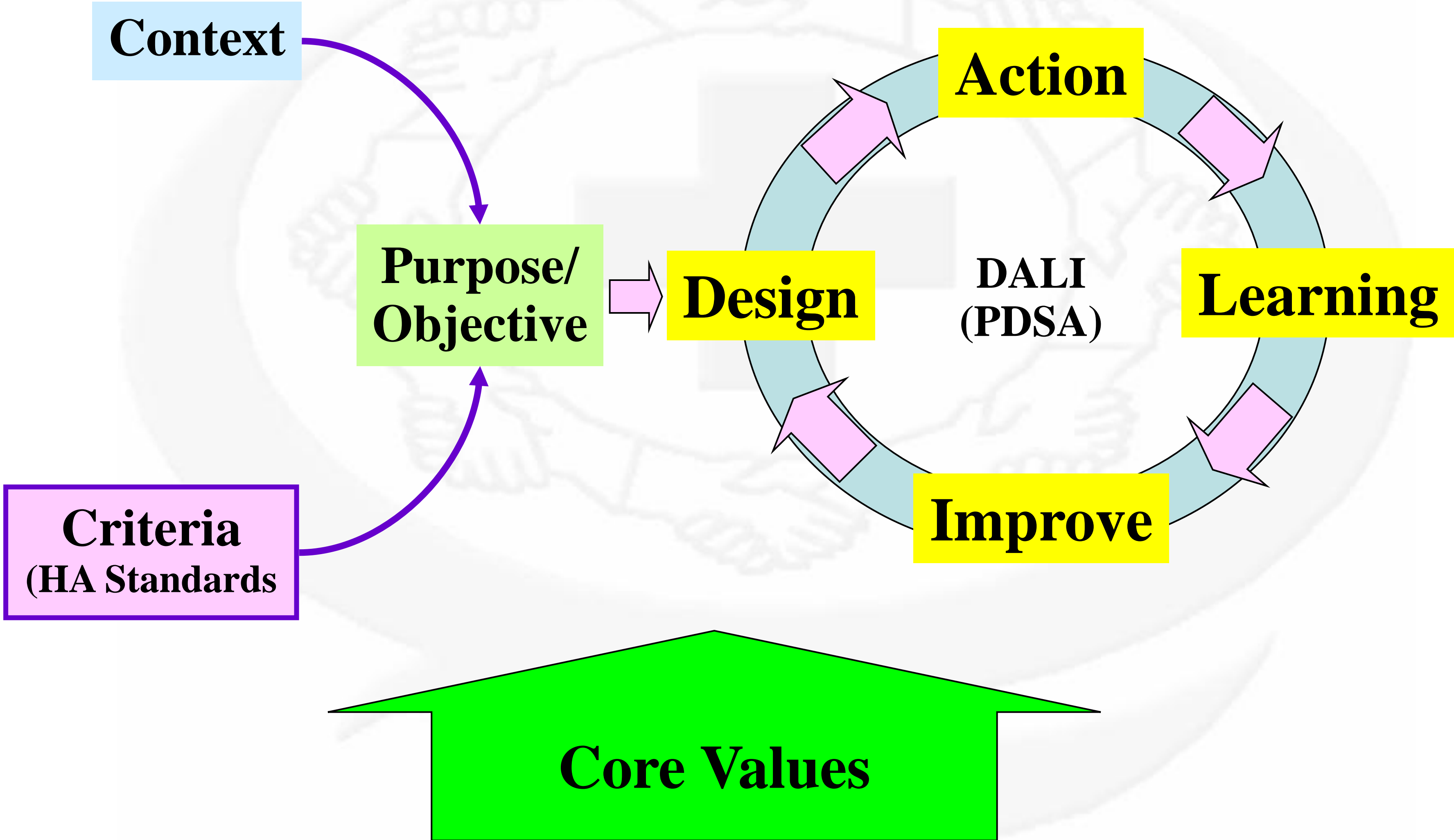
Learning & Integration

Integration with People-Centered Care Initiated by WPRO

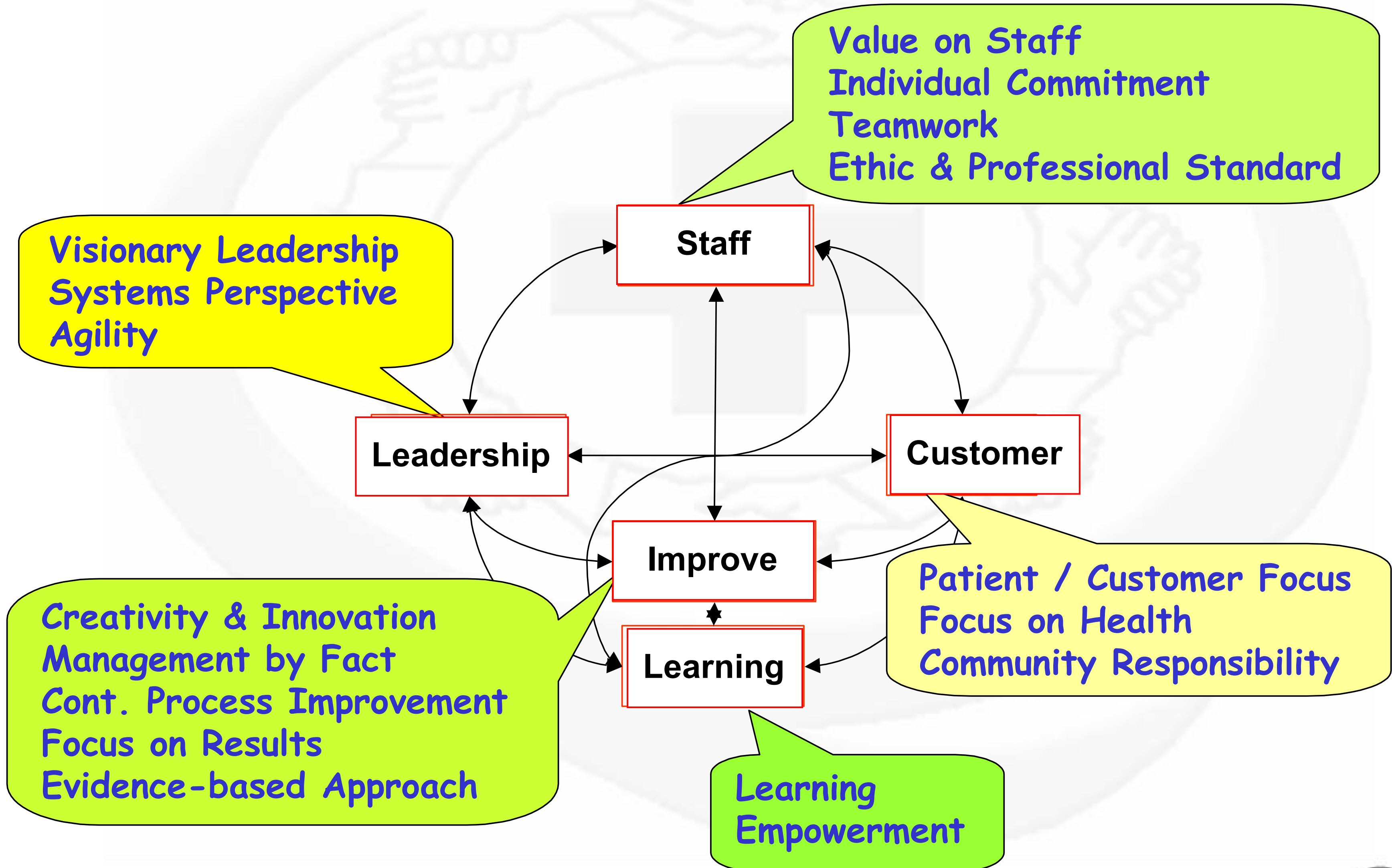


Domain 3 : Efficient and Benevolent Healthcare

3C-PDSA
Cycle of Learning & Improvement



Core Values



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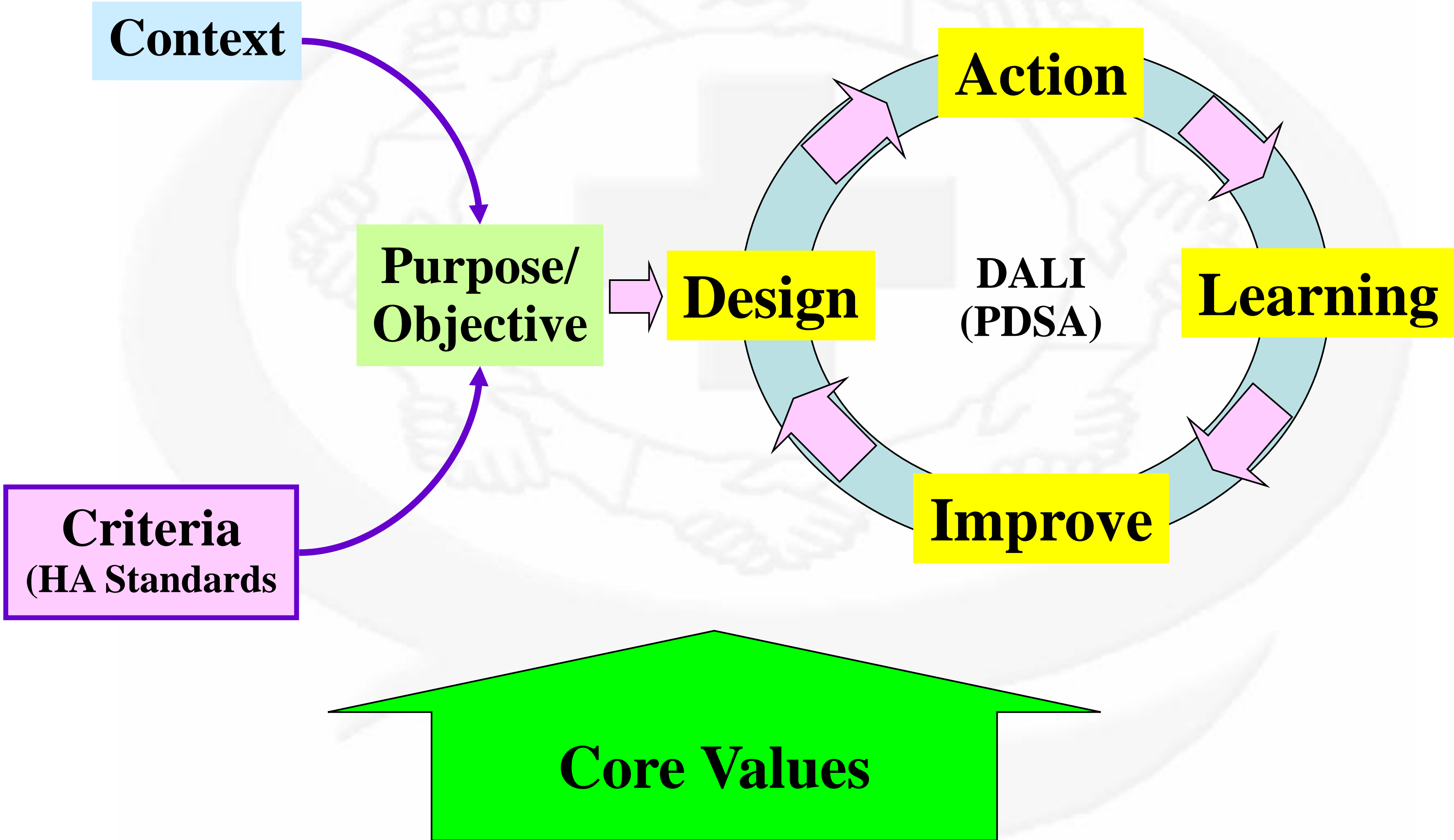
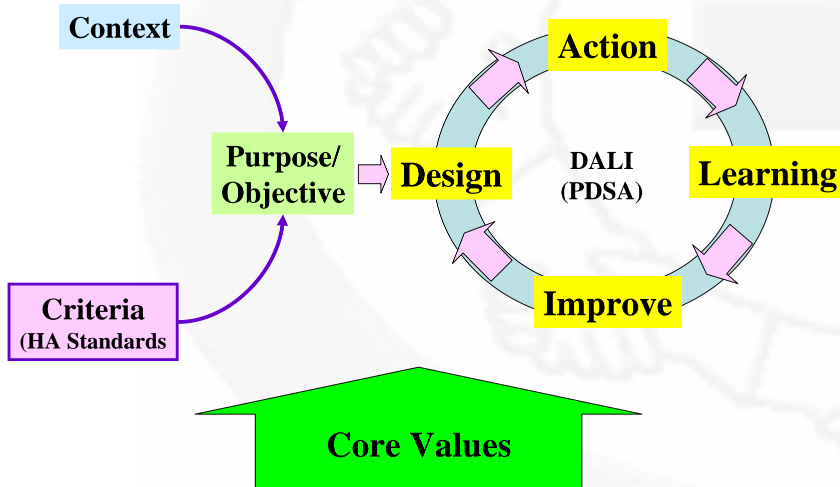


Learning & Planning Tools



- Knowledge Management
- Performance Improvement
  - CQI
  - Lean
  - Six Sigma
- Self Assessment
  - Identify opportunities for improvement
  - Clinical review / audit
    - By case
    - By clinical population
  - Performance review
  - Self enquiry
  - Internal survey
  - Scoring
- Research

Optimal Method of Scoring

5 – level scoring
Combination of JCI & MBNQA – quite complex
A simpler approach: example of leasership

1. **Reactive, problem solving**
2. **Policy support, QA focus**
3. **Create environment for collaboration & performance improvement, communicate, motivate & monitor**
4. **Emphasis learning & empowerment, evaluate effectiveness of leadership system**
5. **User vision & values to be a high performing & sustainable organization**

Look at HA by Other Perspectives

Safety Perspective

Quality Review
Risk Management System
Patient Safety Goals
Trigger Tools to Identify Adverse Event

Standard Perspective

Hospital Standards
3C-PDSA
Self Assessment Tools
Scoring System

Spirituality Perspective

Humanized Healthcare
Living Organization

Quality Review

Medical Record Review

Entry → Assessment → Planning → Implementation → Evaluation → Discharge

Bedside Review

Other Reviews

Risk & Care
Communication
Continuity & D/C plan
Team work
HRD
Environment & Equipment

Customer Complaint Review
Adverse Event/Risk Management System
Competency Management System
Infection Control
Drug Management System
Medical Record Review
Resource Utilization Review
KPI Review

Patient Safety Goals : SIMPLE

S: Safe Surgery	
S 1	**SSI Prevention**
S 2	**Safe Anesthesia**
S 3	**Safe Surgical Team**
S 3.1	Correct procedure at correct body site (High 5s / WHO PSS#4)
S 3.2	

I: Infect	
I 1	
I 2	
I 2.1	
I 2.2	
I 2.3	

M: Medication & Blood Safety	
M 1	**Safe from ADE**
M 1.1	Control of concentrated electrolyte solutions (WHO PSS#5) Managing concentrated injectable medicines (High 5s)
M 1.2	
M 2	
M 2.1	
M 3	
M 4	

P : Patient Care Processes	
P 1	**Patients Identification** (WHO PSS#2)
P 2	**Communication**
P 2.1	Effective Communication –SBAR
P 2.2	Communication during patient care handovers (High 5s / WHO PSS#3)
P 2.3	Communicating Critical Test Results (WHO PSS)
P 2.4	
P 2.5	
P 3	
P 4	
P 4.1	
P 4.2	

L : Line, Tube & Catheter	
L 1	Avoiding catheter and tubing mis-connections (WHO PSS#7)

E: Emergency Response	
E 1	**Response to the Deteriorating Patient / RRT**
E 2	**Sepsis** (HA)
E 3	**Acute Coronary Syndrome** (HA)
E 4	**Maternal & Neonatal Morbidity** (HA)

Thai HA Trigger Tool
A Screening Tool to Identify Adverse Events

Select High Risk Charts → Trigger Reviewed → Portion of Chart Reviewed → AE Identified

- N → End Review
- Y → Harm Category Assigned → AE / 1000 Days

Total Hospital Days → AE / 1000 Days

Aim to identify adverse event

Not necessary for the carers to involve

Link adverse event with relevant systems

Anes complication
Blood
Critical Care
Drug (ADE)
ER revisit
Grievant/complaint
Infection (NI & ?NI)
Lab
Med Rec
(death, readmit, complication)
Nurse supervision
Obstetrics
Report (incident)
Surgical care
Transfer

E: Temporary harm to the patient and required intervention
F: Temporary harm ... required initial o... hospitalization
G: Permanent patie...
H: Intervention required to sustain life
I: Patient death

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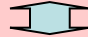
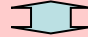
Humanized Healthcare
Living Organization

Institute of Hospital Accreditation, THAILAND

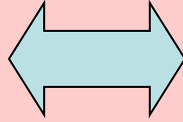
Information & Knowledge Management





Strategic Planning

Staff Focus



Leadership

Results

Patient Focus & Patient Right

Process Management

PART I

MBNQA/TQA Model

PART IV

- Clinical Results
- Patient & Customer Results
- Financial Results
- Staff & Work System Results
- Organization Effectiveness
- Leadership & Social Resp
- Health Promotion

Key Hospital Systems PART II

- Risk, Safety & Quality
- Clinical Governance
- Environment of Care
- Infection Control
- Medical Record System
- Medication Management
- Clinical Investigation System
- Disease Surveillance
- Work with Community
- Patient Care Process

PART III

Patient Care Process

- Entry
- Assessment
- Planning of Care
- Delivery of Care
- Education & Empowerment
- Continuous Care

HA Standards 2006

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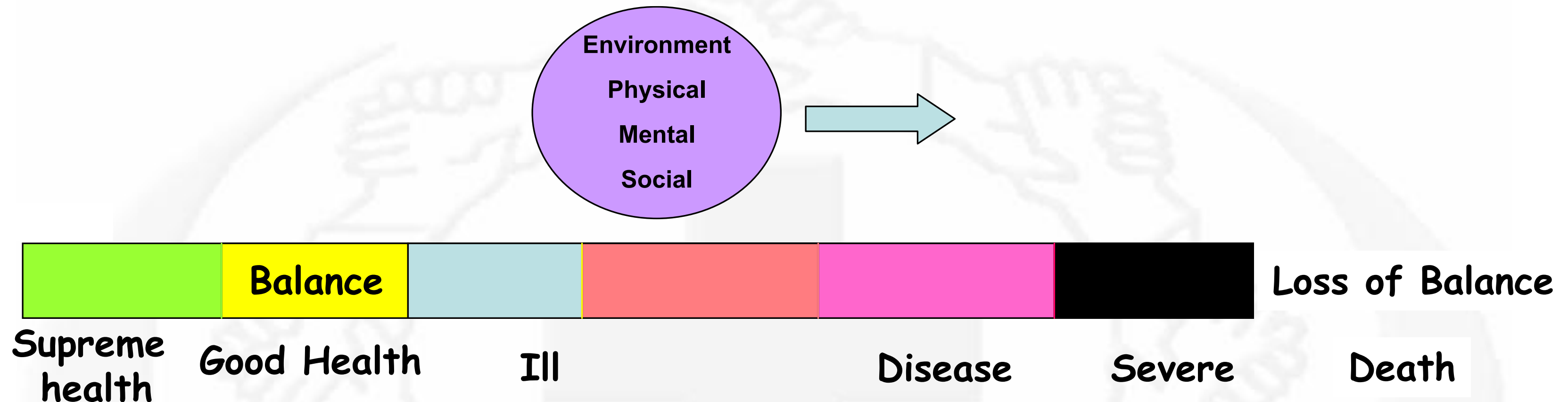
Humanized Healthcare



- New concept of health
- Modernization is not enough
- Balance of bio-medical & spiritual approach
- Low cost, high touch
- Providers' satisfaction & maturity
- Patients are teachers

Living Organization

Application of new sciences with org. management

- **Living system : open, self-organizing system, flexible/adaptive, creative, learning capability, spirituality**
- **Leadership is the person who put a right influence at a right time**
- **Efficient communication is through informal network, allow free interpretation of information**
- **The staff should have opportunities to work on what value and have meaning to them**
- **Turning & listening to one another, deep listening, dialogue, U theory**
- **HRD need to consider spiritual development**

A History of Journey

10th (2009): Lean & Seamless Healthcare

9th (2008): Living Organization

8th (2007): Humanized Healthcare

7th (2006): Innovate, Trace & Measure

6th (2005): Systems approach

5th (2004): Best Practice Balance of Quality

4th (2003): Knowledge Management for Patient Safety

3rd (2002): Simplicity in a Complex System

2nd (2000): Roadmap for a learning Society in Healthcare

1st (1999): Hospital Accreditation