

Thailand's Quality Improvement Journey

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Thailand





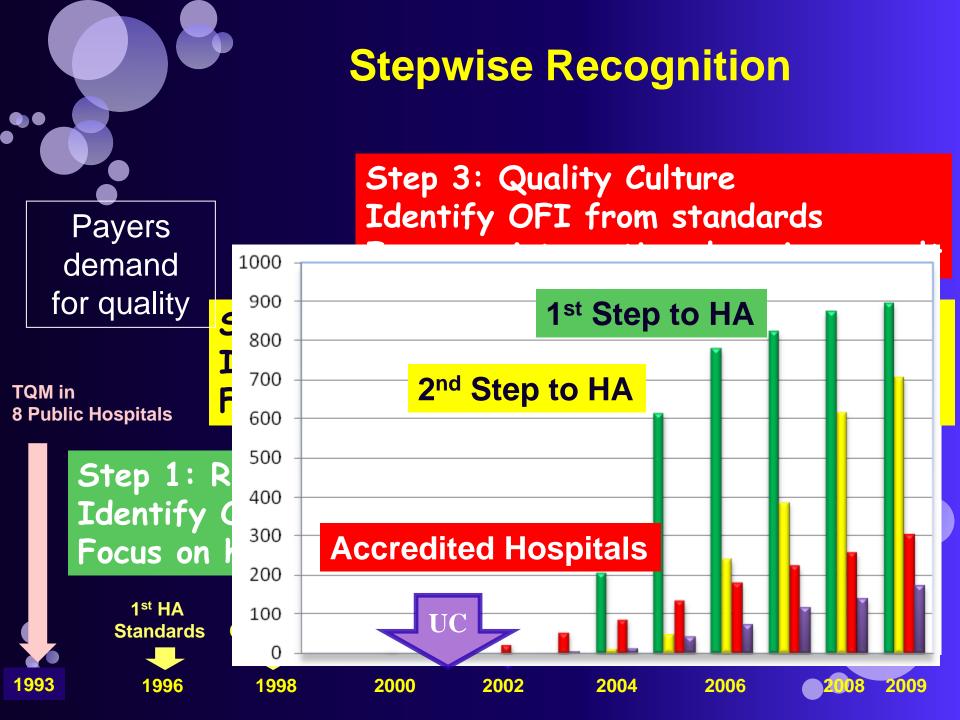


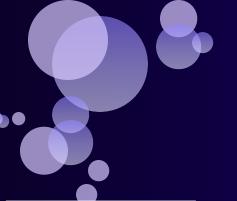
The Long Journey

- 1981 Community hospital management
- 1983 Nursing service
- 1984 STAR the hospitals
- 1985 Rural healthcare system & network
- 1989 Nursing quality assurance
- 1993 Pilot TQM/CQI in public hospitals
- 1993 Social Security Standards for hospitals (capitation payment)

Hospital Accreditation





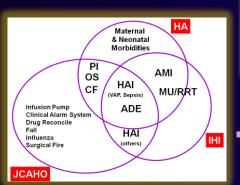


Patient Safety

Review & Redesign

Complaints to payer

Nationwide solutions



Readmit, ER revisit
Death / CPR
Complication
ADE & ?ADE
NI & ?NI
Refer
Incident
Unplanned ICU
Anes complication
Surgical risk
Maternal & neonatal
Lab
Blood
Pt Complaint
Nurse supervision

Patient Safety Goals / Guides: SIMP Safe Surgery Hand Hygiene Infection Contro Prevention of Safe Before the Safe **Medication & Blood Safety** Accident Tackling antimicrobial resistance Blood Safety Patient Identification Communication (SBAR, handovers, critical test **Patient Care Process** results, verbal order, abbreviation) **Proper Diagnosis** Preventing common complications (Pressure Line, Tubing, Cathether Ulcers. Falls) Mis-connection Acute Coronary Syndrome **Emergency Response** Maternal & Neonatal Morbidity Response to the Deteriorating Patient / RRT

2nd Patient Safety Goals

Trigger Tools

1st Patient Safety Goals

Quality Review



2002

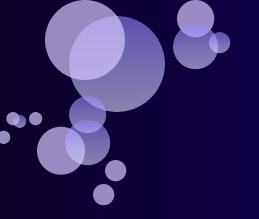
2006

1008 20

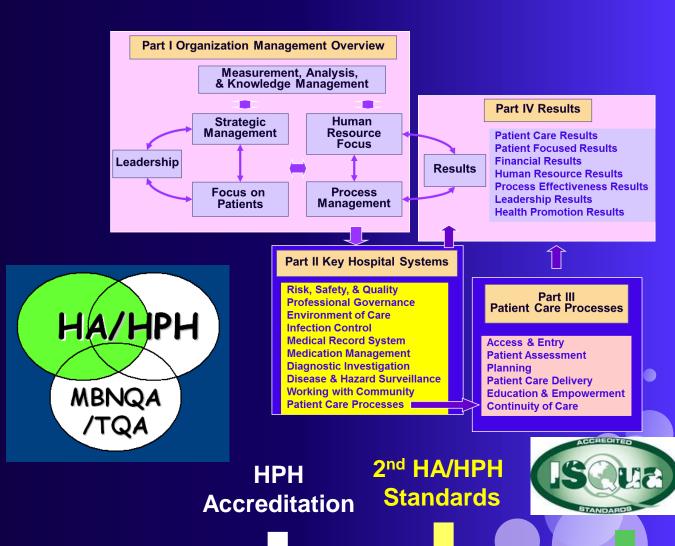
HINDSIGHT BIAS

After the

Accident



Thai HA Standards Version 2





1998

Implementing HA/HPH Standards

- Consider core values & context together with criteria in the Standards and move PDSA
- Evidence-based practice is one of the core values
 - Quality review: evidence-based practice review
 - Patient Safety Goals-SIMPLE: evidence-based guidelines
 - Redesign the process: seek evidence
 - Comparative indicators: guided by evidence of effectiveness
 - Integrated model of clinical CQI



Spiritual Dimension of Quality Improvement



Sustainable
Healthcare & Health Promotion by
Appreciation & Accreditation

Spiritual HA

Self: Awareness

Patient: Humanized Healthcare, empowerment

2000

Team: Living Organization

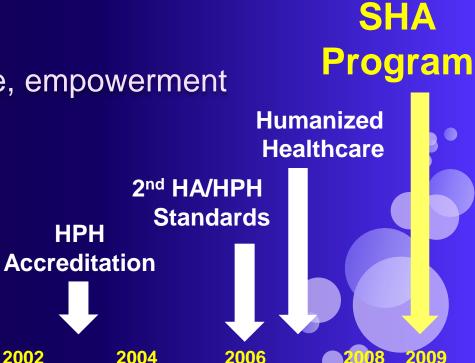
Env: Healing Environment

Survey: Appreciation

1996

Tool: Narrative/storytelling

1998



HA National Forum A Forum for Campaign & Sharing

1st (1999): Quality Improvement to Serve the Public

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

3rd (2002): Simplicity in a Complex System

4th (2003): Best Practices for Patient Safety

5th (2004): Knowledge Management for Balance of Quality

6th (2005): Systems Approach: A Holistic Way to Create Value

7th (2006): Innovate, Trace & Measure

8th (2007): Humanized Healthcare

9th (2008): Living Organization

10th(2009): Lean & Seamless Healthcare

11th (2010): Flexible & Sustainable Development

12th (2011): Beauty in Diversity

13th (2012): The Wholeness of Work & Life



1993

1996

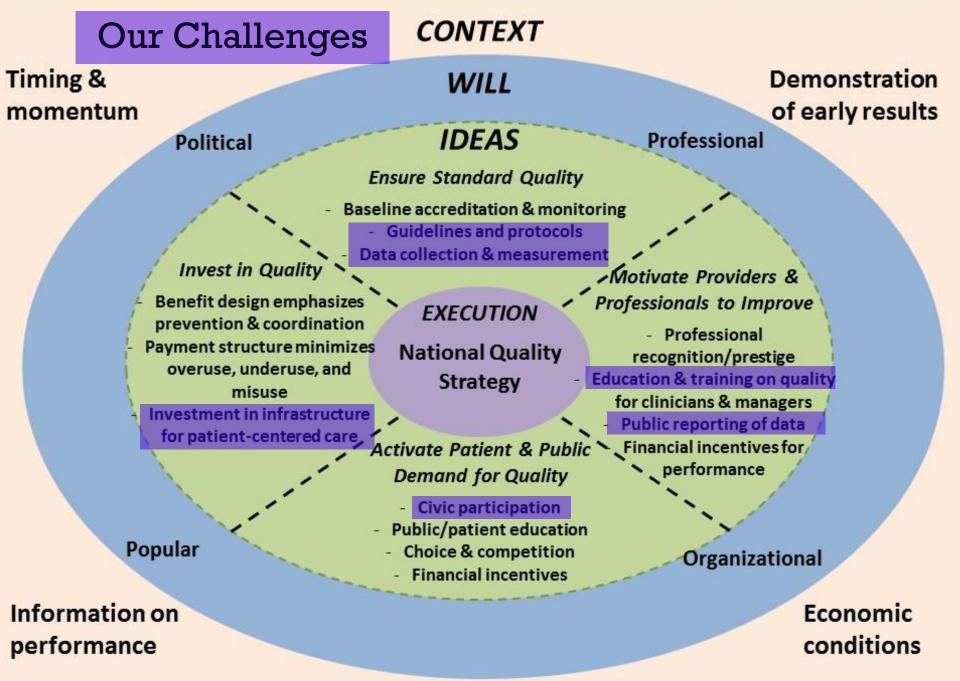
2008 2009



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

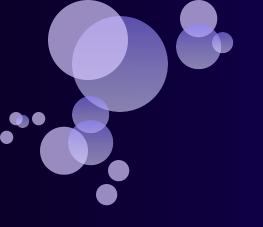
Financial Incentives

- First to demonstrate value of quality, then to facilitate quality achievement
- Incentive may be
 - Direct: monetary
 - Indirect: quota of patients
- Intangible financial benefits
 - Use LEAN to transform waste to value



Challenges & Strategies

- **Staff**
- Attitude and education ->
 - Role model of educational institutes
 - Re-train after graduate
- Turnover of staff -> area-based collective effort
- Management
 - Leadership -> peer motivation
 - Incentive -> keep balance
 - Workload -> empower the communities
- Patient-centered care
 - Seamless healthcare -> SPHInX (Seamles Provincial Healthcare Innovation & Excellegee)
 - Quality of primary care -> local mechanis



Thank You



