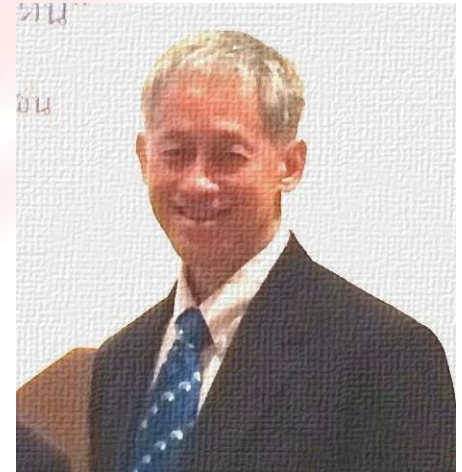


Accreditation As a Path to Achieving Universal Quality Health

Anuwat Supachutikul, M.D.

CEO, Healthcare Accreditation Institute, Thailand
Presented to the NYS HIV Quality of Care Advisory
Committee Meeting
10th December 2015



The Healthcare Accreditation Institute



Healthcare Accreditation Institute, Thailand

VISION: “Thailand has standard healthcare that is reliable to the society, of which the HAI has a role in encouraging quality culture movement (change catalyst)”

MISSION:

“To **encourage**, **support**, and **drive** quality improvement of the healthcare system; using **self assessment**, **external survey**, **recognition** and **accreditation**, and **knowledge sharing** as leverage mechanism”

R&D Project

HA Thailand
Under HSRI

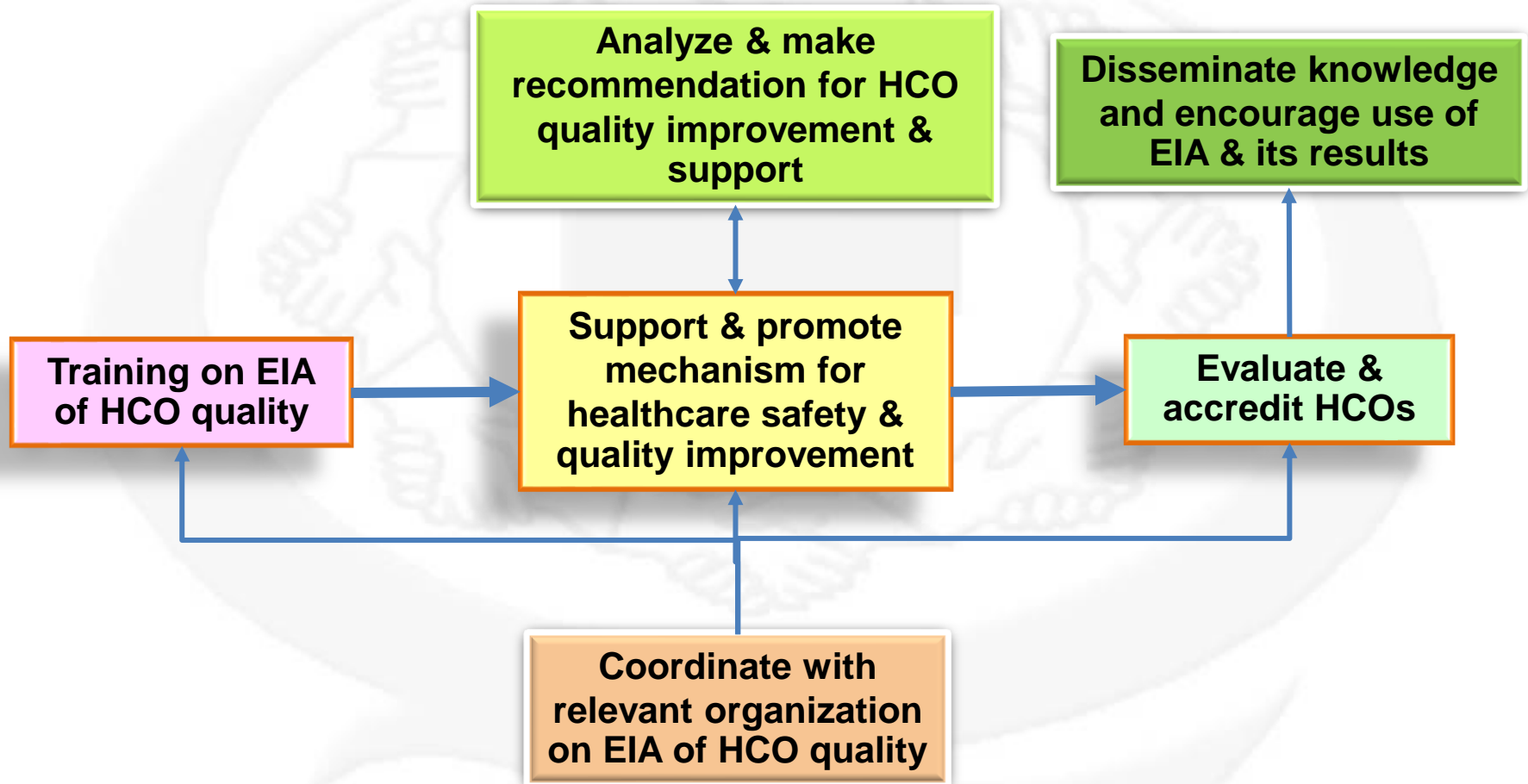
Reliable, Impartial,
Government Support

The HAI (Public Organization)
Independent Gov. Agency

3 94 95 96 97 98 99 00 01 02 03 04 05 06 07 08 09 10 11 12 13 14



Functions of the HAI



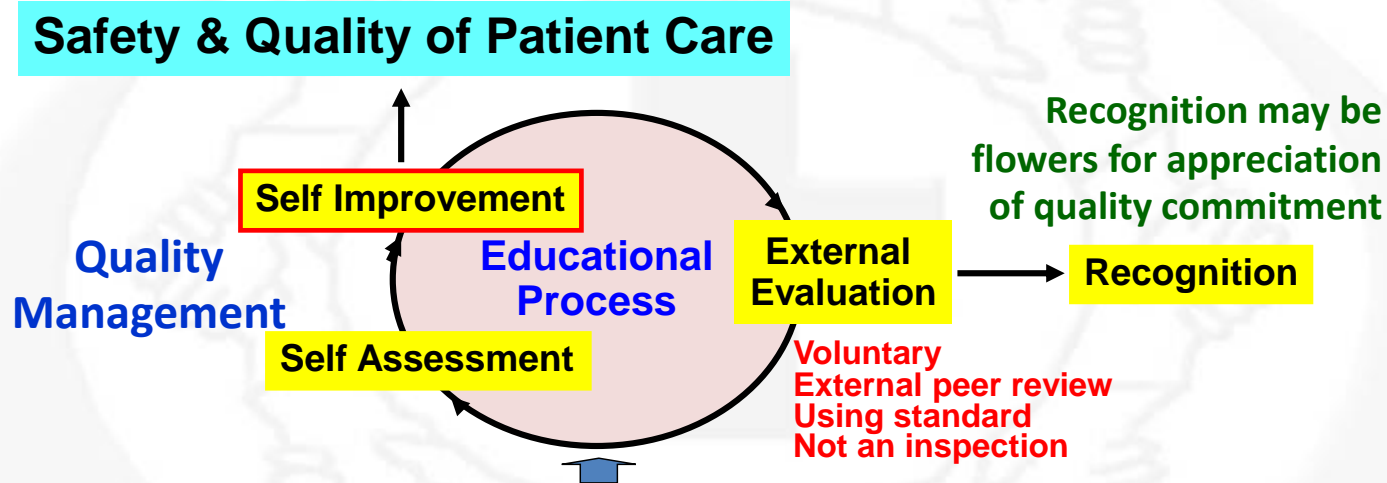


Special Focus of the Thai Healthcare Accreditation System

- Emphasis accreditation as an educational process, not an inspection, aim for empowerment evaluation
- Balance of improvement based on quality system, spirituality, science & knowledge
- Integration of all relevant concepts, standards, and criteria
- Offer multiple models of recognition, including stepwise recognition
- Promote quality improvement through local quality learning networks
- Involvement of professional organization



HA as an Educational Process Not an Inspection



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

HA Standards
Implementation
(R&D Project)

Balance of learning mode & audit mode



International Recognition



2nd HA/HPH
Standards

Quality & safety

1st HA
Standards

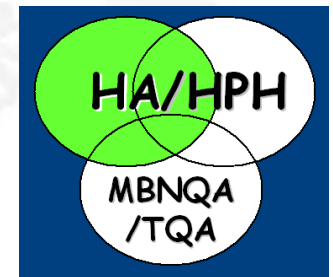
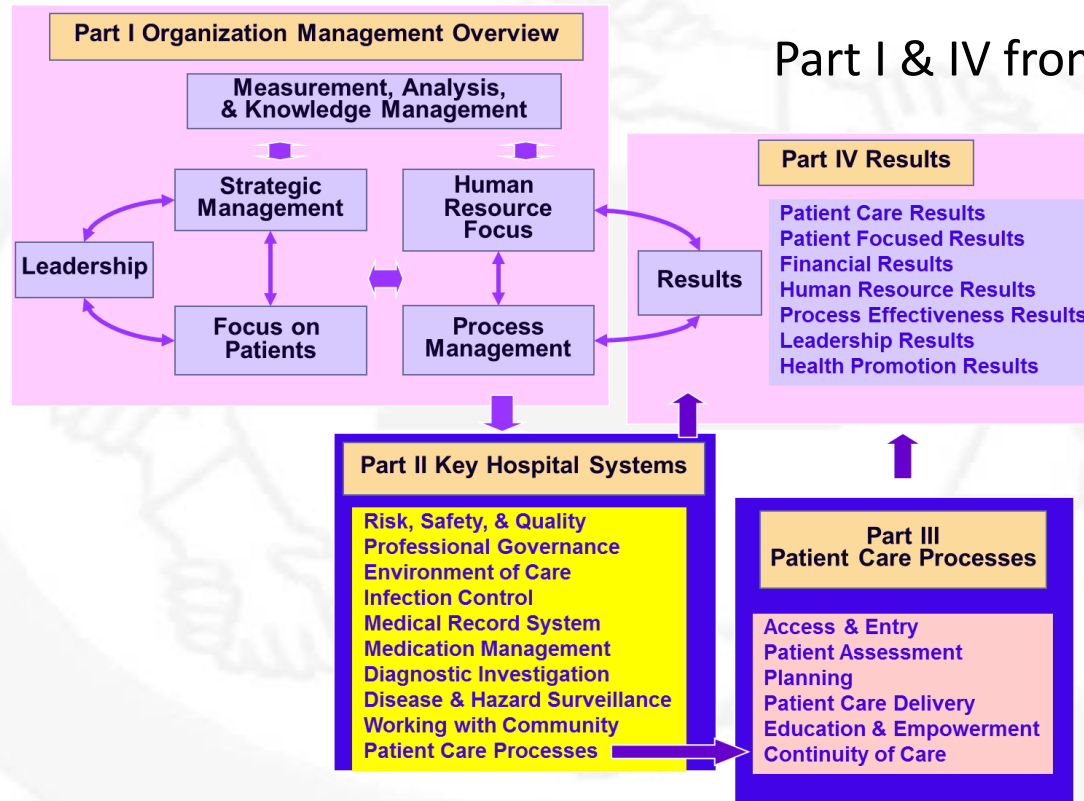
HPH
Accreditation



93 94 95 96 97 98 99 00 01 02 03 04 05 06 07 08 09 10 11 12 13 14



Thai HA Standards Version 2



Part II & III from HA & its revision
Integrate HPH into all chapters

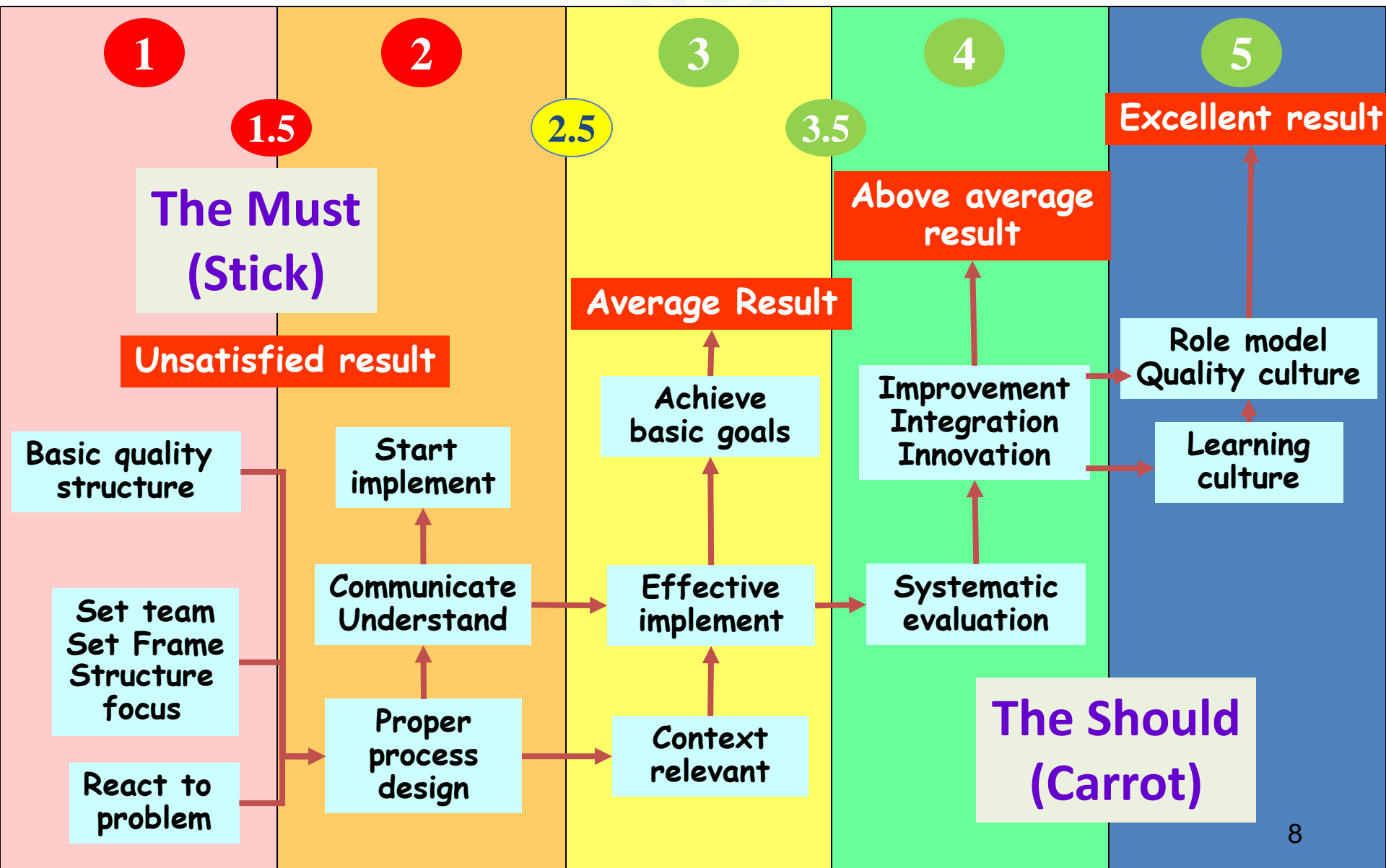
2nd HA/HPH
Standards

HPH
Accreditation



93	94	95	96	97	98	99	00	01	02	03	04	05	06	07	08	09	10	11	12	13
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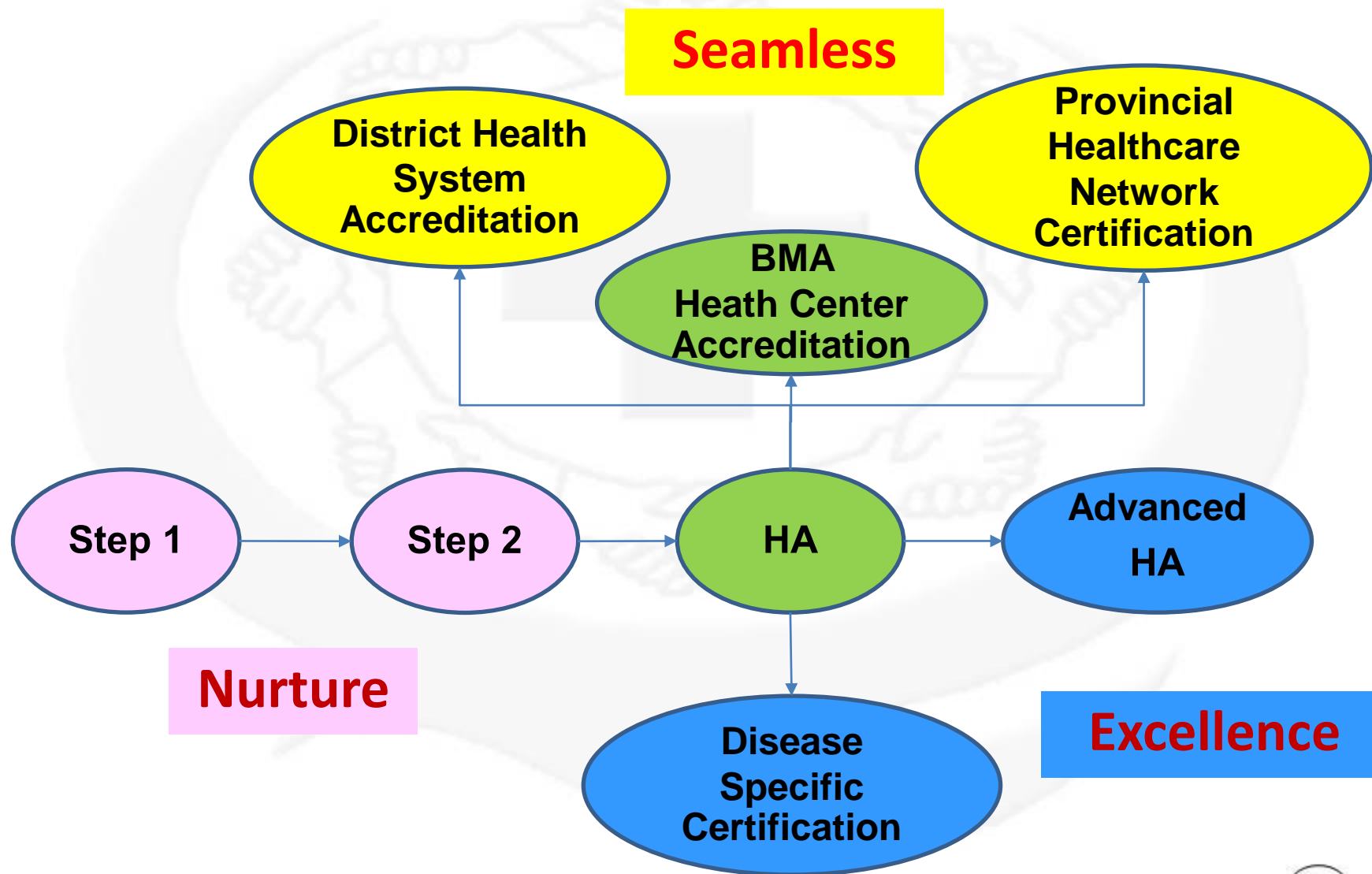
Scoring Guideline: For Continuous Improvement to Excellence



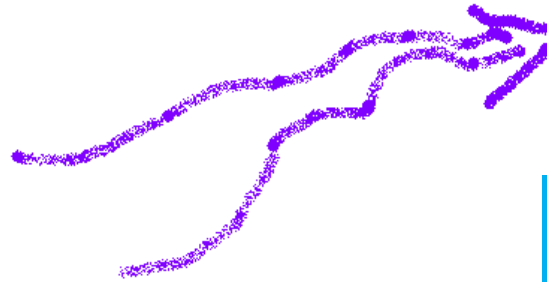
Variety of Accreditation Program



Healthcare Accreditation Institute, Thailand



3 Steps to HA



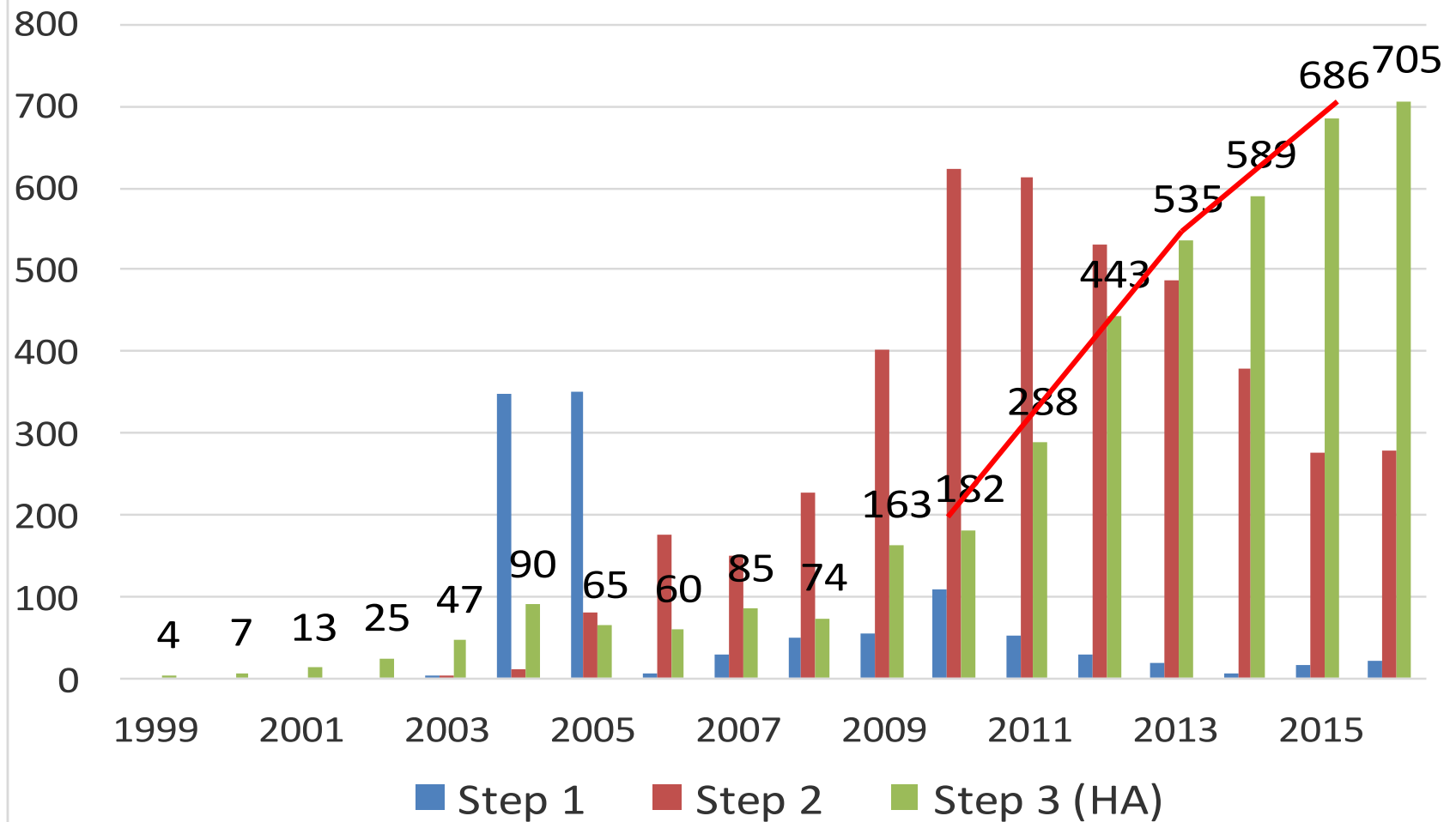
Vision: High
Reliability Hospital

- Step 1 Repair defect (good daily work, dialogue, regular review)
- Step 2 Direction (aim, measure, creative, value)
- Step 3 Speed up (good outcome, quality culture, standard compliance)



Coverage of Accreditation

Total number of hospitals: 1323

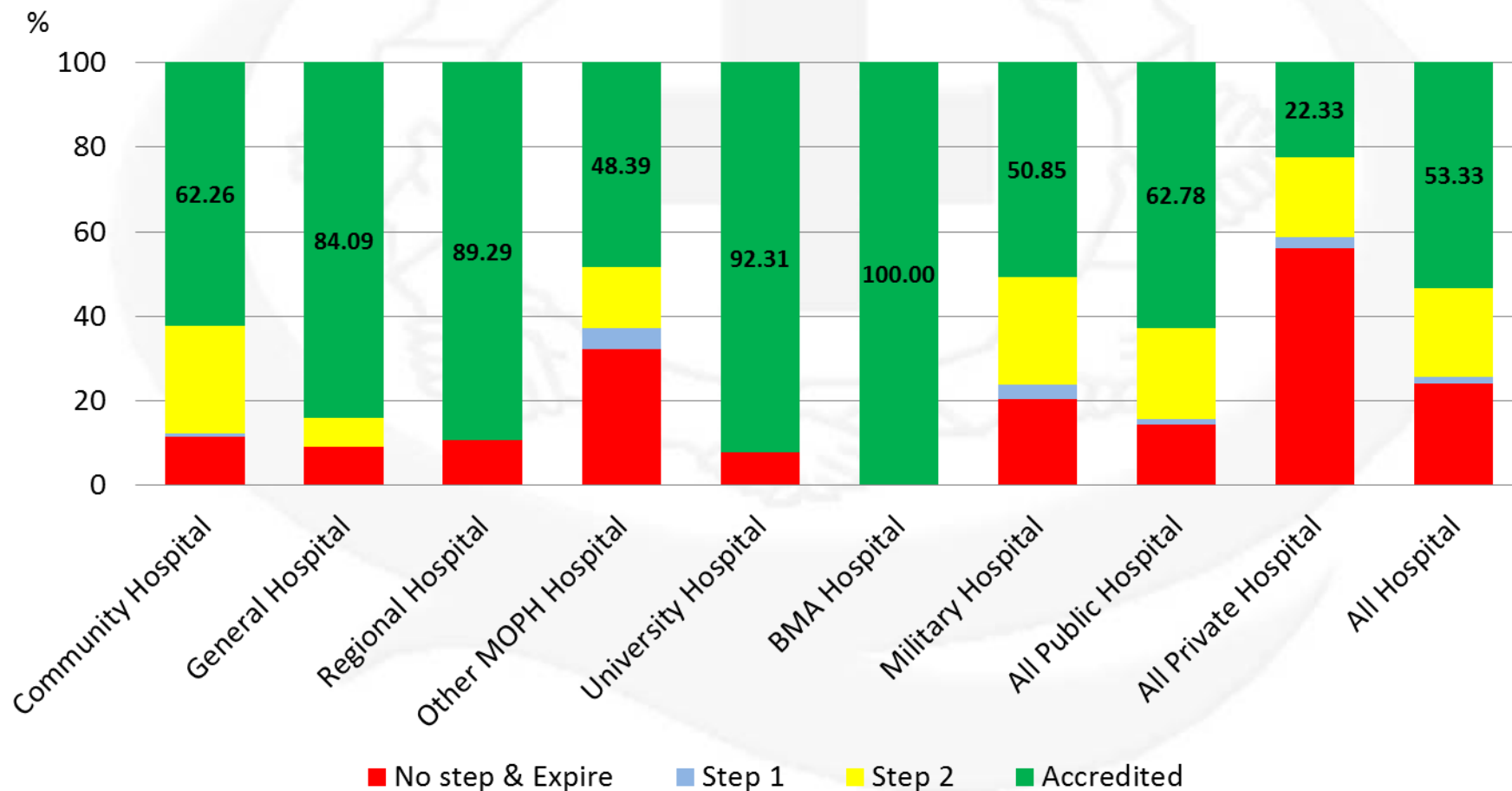


% Coverage of Accreditation By Type of Hospitals



Healthcare Accreditation Institute, Thailand

24 November 2015

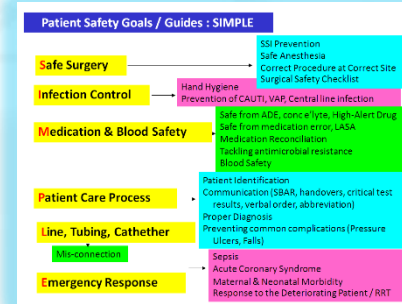




Patient Safety Initiatives

Patient for
Patient Safety

WHO Patient
Safety Curriculum



2nd Patient Safety Goals

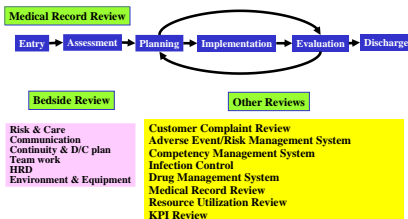
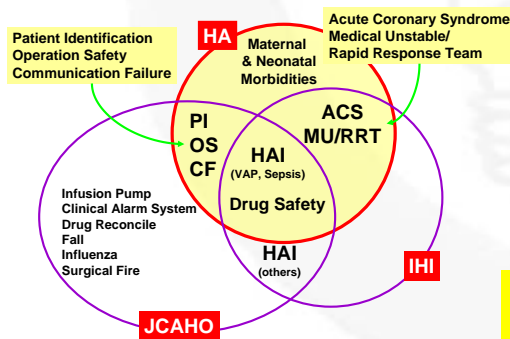
Trigger Tools

Community of
Practice for
high risk area

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

1st Patient Safety Goals

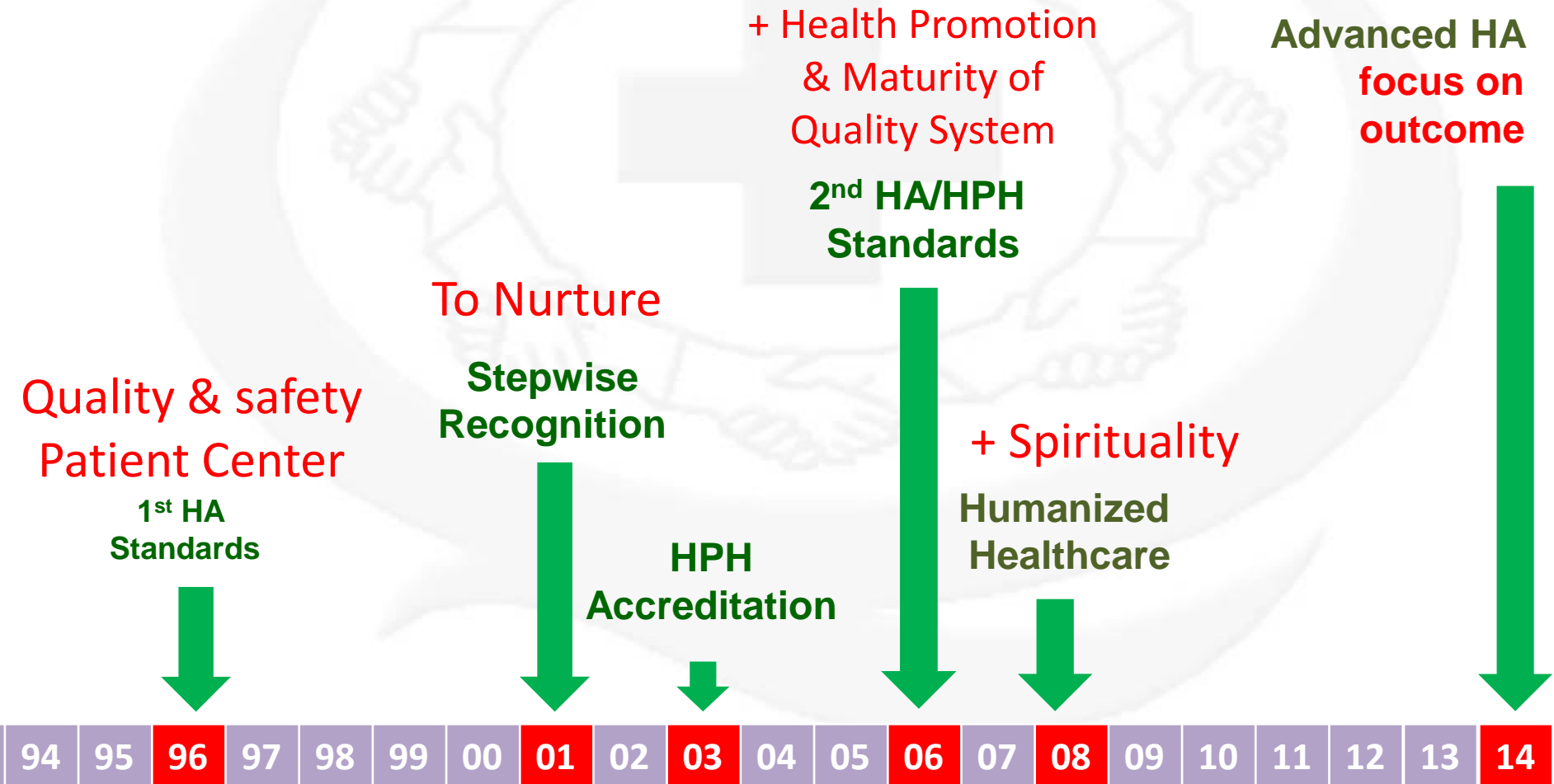
Quality Review



3 94 95 96 97 98 99 00 01 02 03 04 05 06 07 08 09 10 11 12 13 14



The Moving Targets



Spirituality in Healthcare

Self: Awareness

Team: Deep listening & productive discussion

Patient: Humanized Healthcare, empowerment

Org.: Living Organization

Env: Healing Environment

Survey: Appreciation

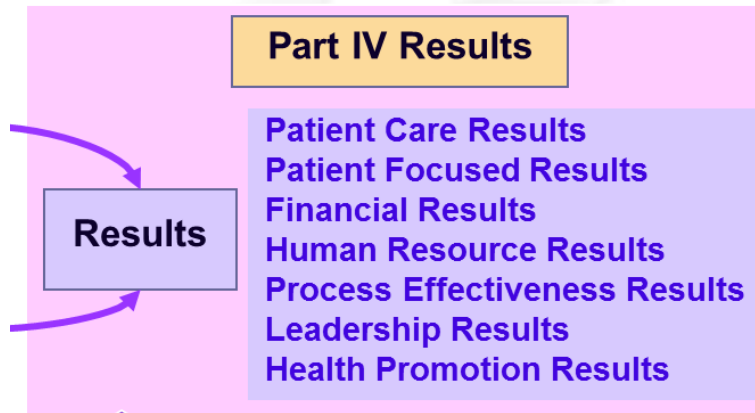
Tool: Narrative/storytelling





Focus on Performance

Advanced HA
focus on
outcome



Comparative Hospital
Indicator Project
Phase I

Comparative Hospital
Indicator Project
Phase II

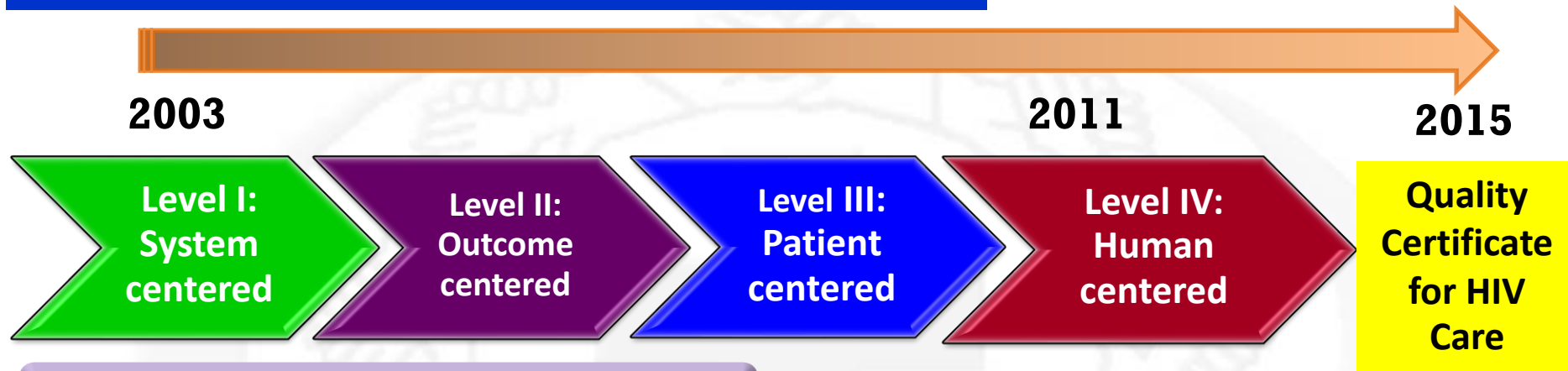
2nd HA/HPH
Standards
Specify area of
performance to be
monitored

Self-determined KPI





HIVQUAL-T Evolution



HIVQUAL-T indicators

Quality Improvement Processes

Humanized health Care

Expansion of national HIV quality improvement project for adults



Year 2004-2005

7 Provinces

60 Hospitals
6.7 % of gov. hospitals



Year 2006

61 Provinces

233 Hospitals
25.9 % gov. hospitals



Year 2007-2010

76 Provinces

700 Hospitals
77.8 % gov. hospitals

What did HAI do?

- Say “Yes” (Same concept, good tool, good team, people & environment are ready)



UHC Policy for Quality

SSO Payment

- Accreditation status
 - HA Step 3 +80 Baht per cap
 - HA Step 2 +40 Baht per cap

NHSO Payment (Local Criteria)

- Asthma admission rate
- COPD admission rate
- COPD readmission rate
- Stroke rehabilitation
- Palliative care
- MCH quality
- C/S rate
- Low birth weight <7%
- Ruptured appendicitis
- PTC
- Complaint management

NHSO Payment (Central Criteria)

- Accreditation status (0.76 Baht per capita)
 - Scoring: HA = 5, step 2 = 3)
- Rational drug use (1 Baht per capita)
- Medical record quality (1 Baht per capita)
- Provincial network (2 Baht per capita)
 - STEMI, stroke, chemotherapy, newborn, psychiatry, smoking cessation)

Case Review by the Quality Committee

- Compensation can relieve burden to patients and families
- Limit to consideration of whether a standard care was given or not, by professional views
- Unable to pinpoint to the system's problem





HA Collaborating Center (HACC)

(pink, green, orange, yellow, purple, brown)

Quality Learning Network (QLN)

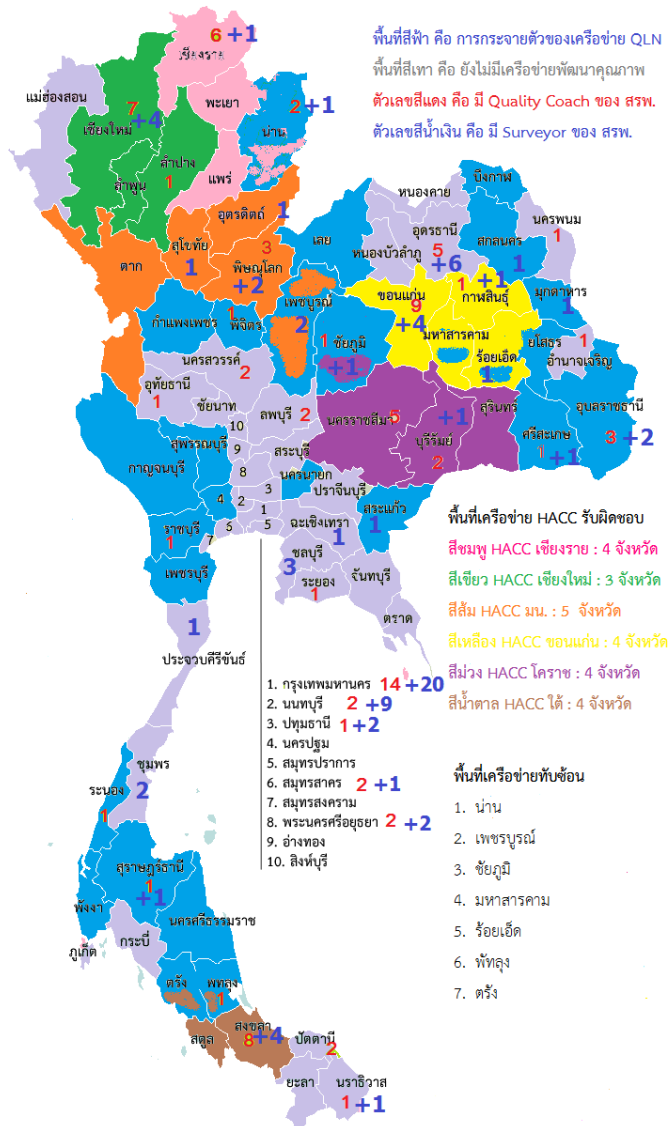
(blue)

Functions:

- Peer assist in the local area with technical support & training from HAI
- Arrange forum for knowledge & experience sharing
- Assess readiness for survey application

Responsible Area:

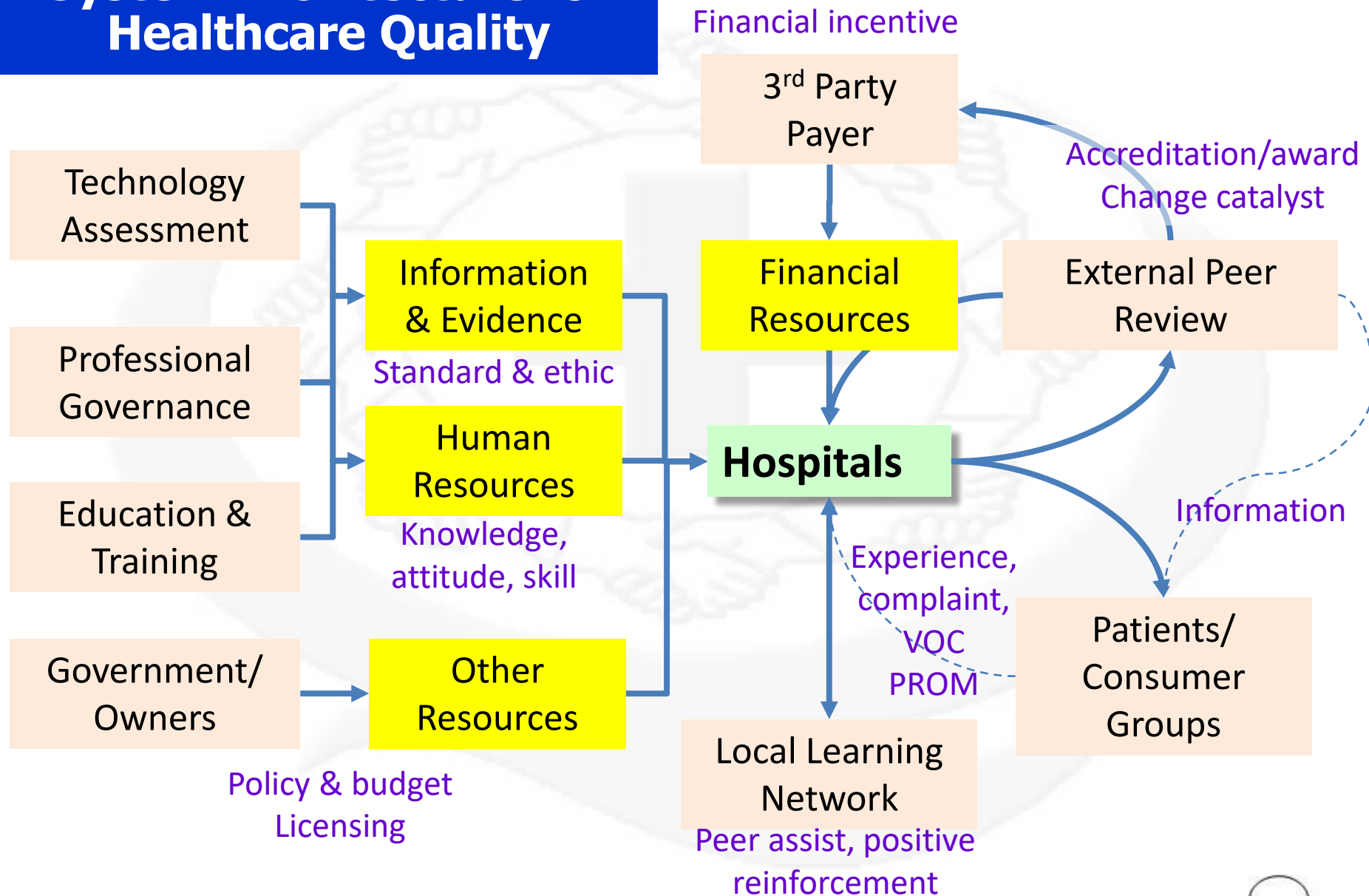
- QLN works within its province
- HACC work in its region and fill gap in the province with no QLN



System Architecture for Healthcare Quality



Healthcare Accreditation Institute, Thailand





Challenges for Hospitals

- Understand and commitment to quality & safety
- To use accreditation as an educational tool
- To improve quality under the higher workload and limited resources

Challenges for HAI

- To create a momentum of a need to change
- To maintain the value of Thai accreditation in the changing environment
- To efficiently response to the needs (surveyors, IT)
- To reduce burden of hospitals in the accreditation process (new model that focus more on patient care results & safety)



Thank you for your attention