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The Healthcare Accreditation Institute (Public Organization)

# Hospital Accreditation as a Lever to Improve Quality

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in Transitional Economy Member States

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# Topics

1. The essence of accreditation
2. How can HA improve quality
3. HA Standards
4. Self-assessment & improvement
5. Performance measurement
6. HA can do more than recognition
7. Suggestion in starting HA

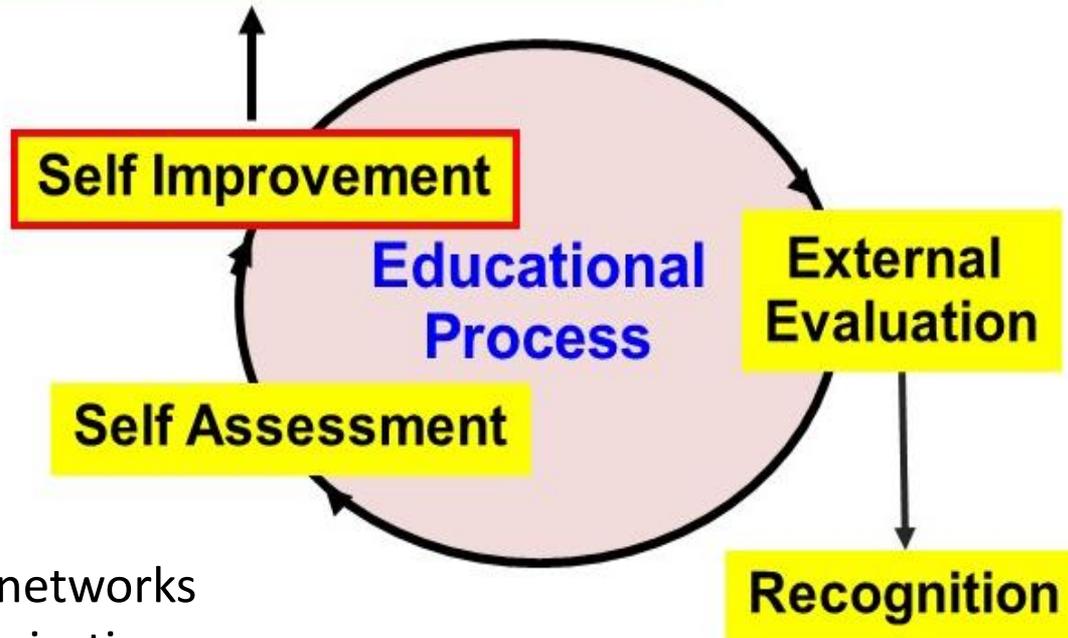


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# 1. The essence of accreditation

# The real essence of accreditation is external peer assist & review for self improvement

**Safety & Quality of Patient Care**



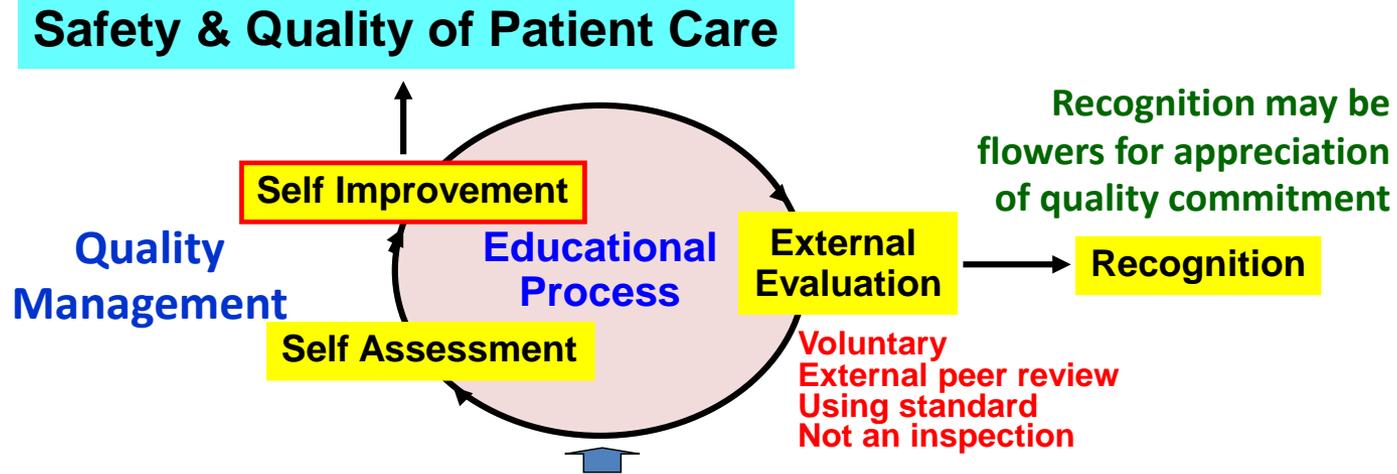
## Peer Assist:

Local healthcare networks  
Professional organizations

## Peer Review:

The accreditation body

# Accreditation 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**

# 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 for the purpose of quality & safety
- Offer multiple **models of recognition**, including stepwise recognition
- Comply with the **ISQua IAP**
- **Promote quality improvement**
  - Local quality learning networks
  - Involvement of professional organization
  - Comparative indicator program
  - HA National Forum



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## 2. How can HA improve quality

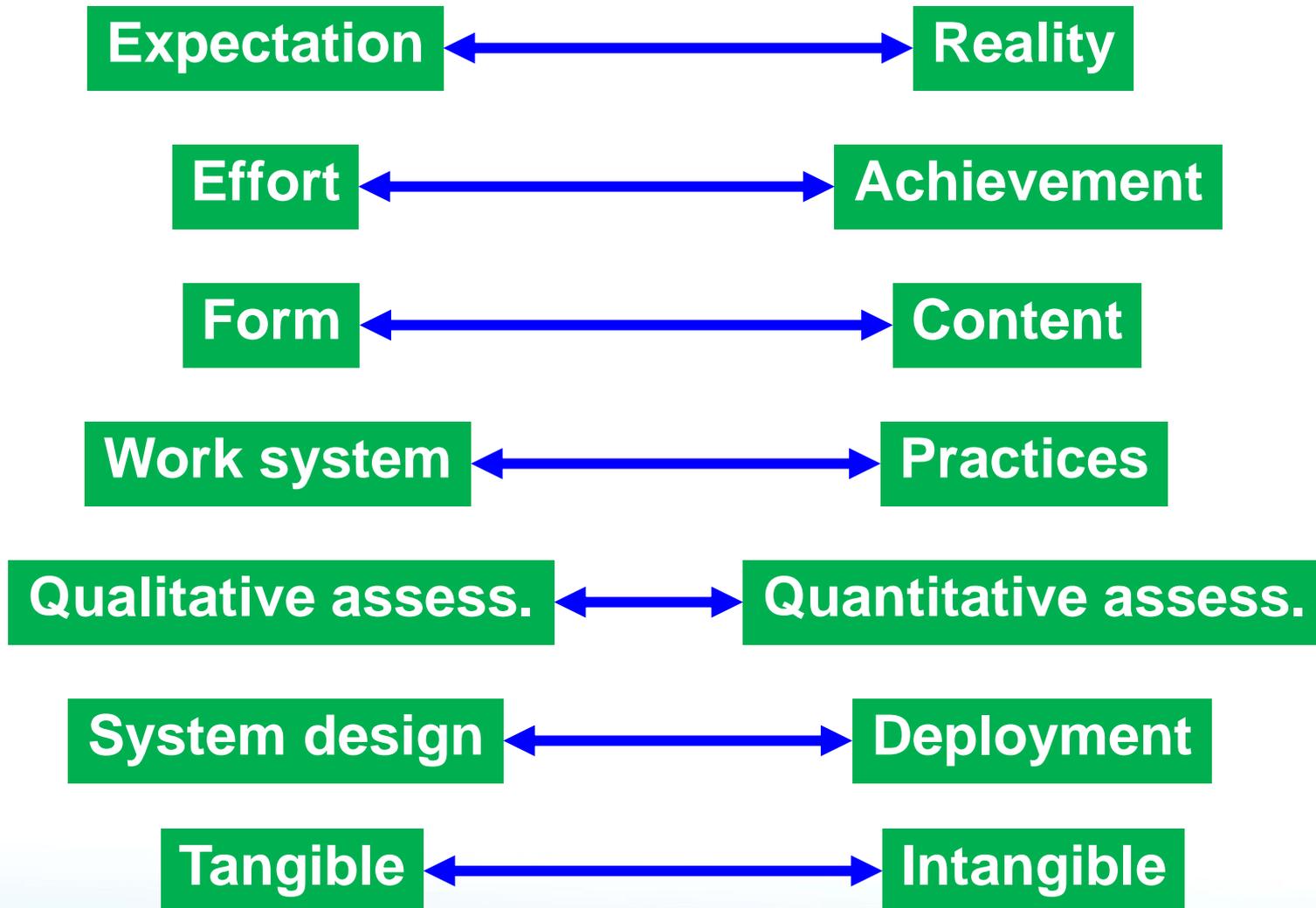
# How Can HA Improve Quality

- **Recognition** is a good motivation
  - Any kind of recognition can be considered
  - Be aware on the negative effect of recognition
- **External peer** with positive approach
  - External peer can provide a neutral and wider viewpoint
  - Hospitals have to prepared themselves for the guests
  - Using learning mode and positive approach make staff relax and enjoy
  - Audit mode may be good in short-term, but not sustained
- A **common framework** is necessary
  - Standards & Scoring Guidelines for assessment
  - Standards, Self-Assessment & PDSA for improvement

# Balance for Recommendation to Nurture QI



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## 3. HA Standards

# HA Standards

- **Comprehensive** for the whole organization
- **Purpose oriented**, less prescriptive, allow flexible methods to be used
- **Balance** of input-process-outcome
- **Be a foundation** for all improvement methodologies
  - Improvement science
  - Knowledge management
  - Innovation & research
  - Strategic planning
  - Human resource development

## Move towards a new paradigm of using standards

- **A basis for comparison.**
- **A principle use for the measure of quality.**



- **An explicit statement of expected quality**
- **Performance specifications that, will lead to the highest possible quality in the system.**



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## 4. Self-assessment & improvement

# Self-assessment to Identify Opportunities for Improvement



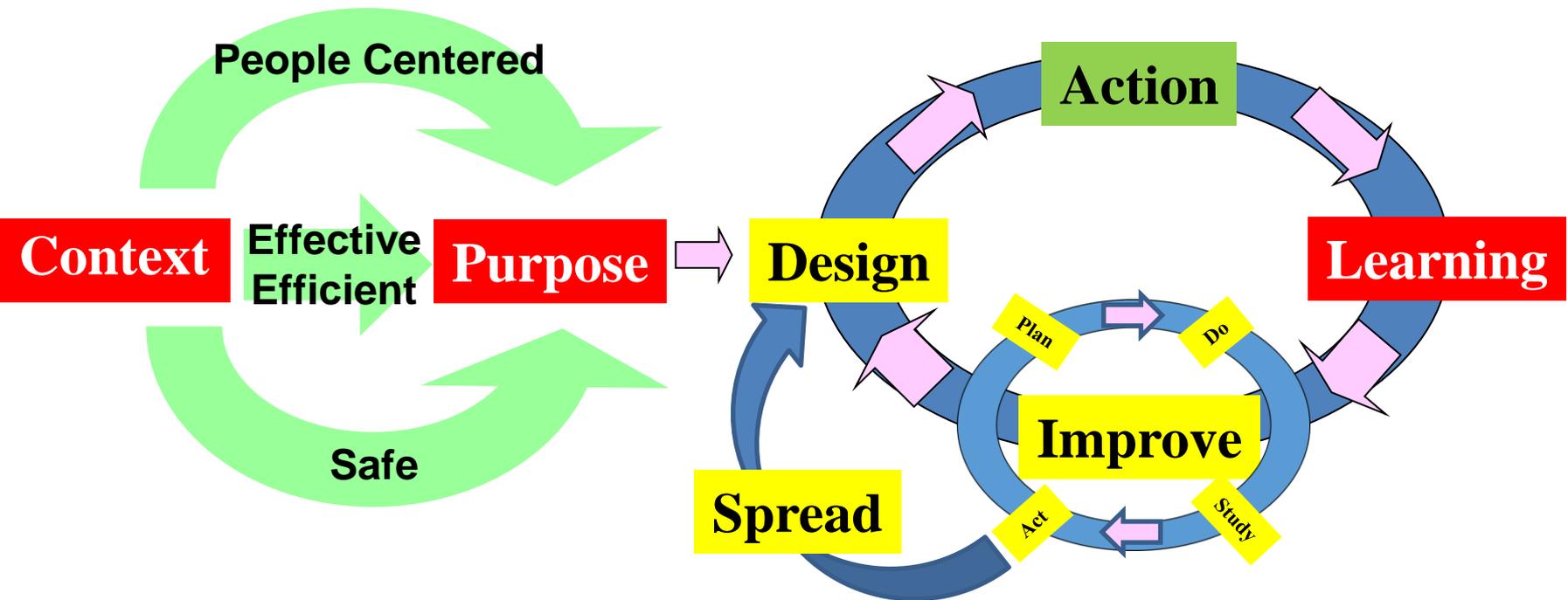
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Quality Dimension	Assessment
Effectiveness	Identify knowledge-practice gap Identify outcome measures
Safety	Identify potential risk
People-centeredness	Listen to patient experience & concern
Efficiency	Identify waste

# Model of Quality Improvement



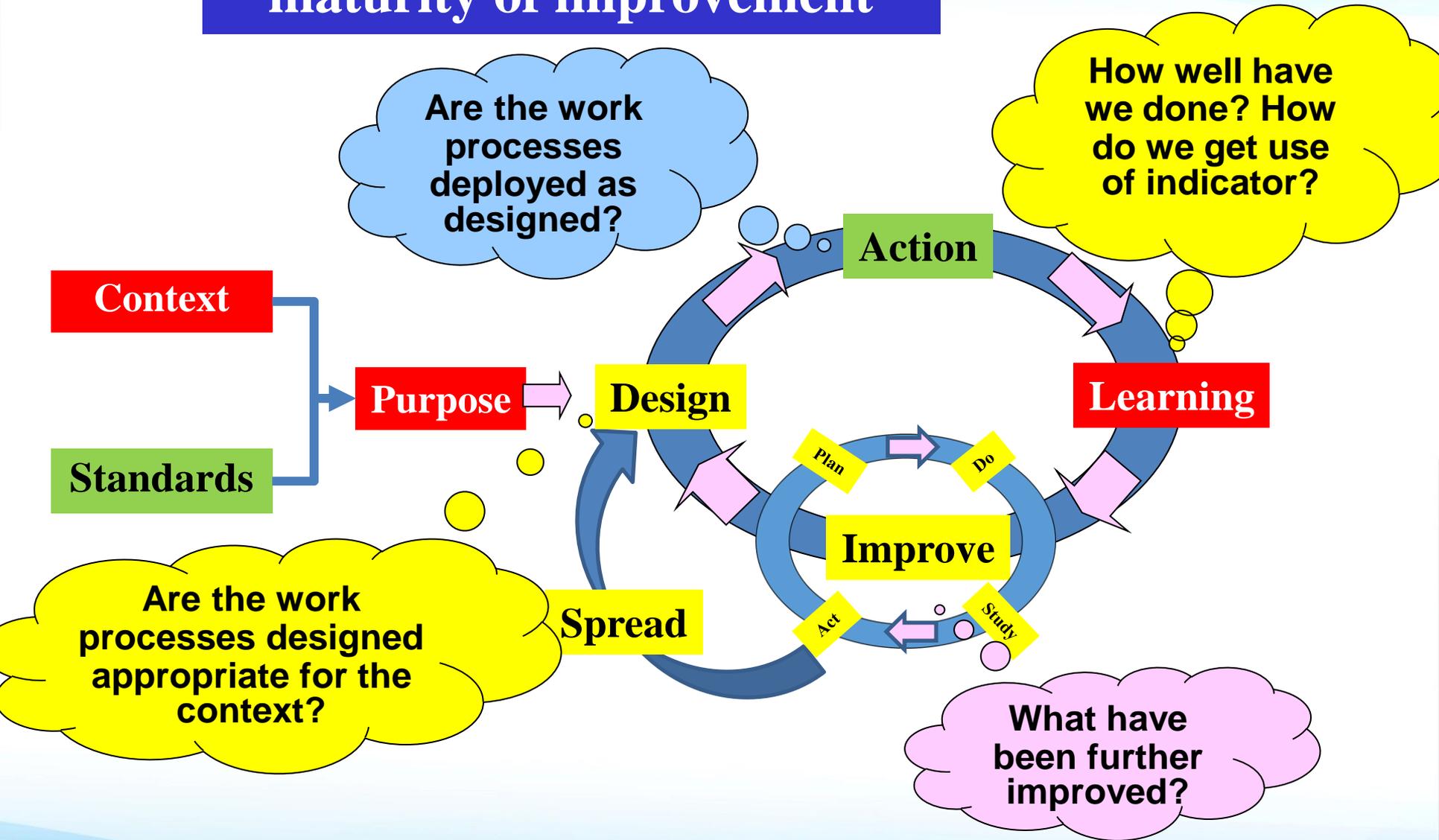
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# Assess the progress & maturity of improvement



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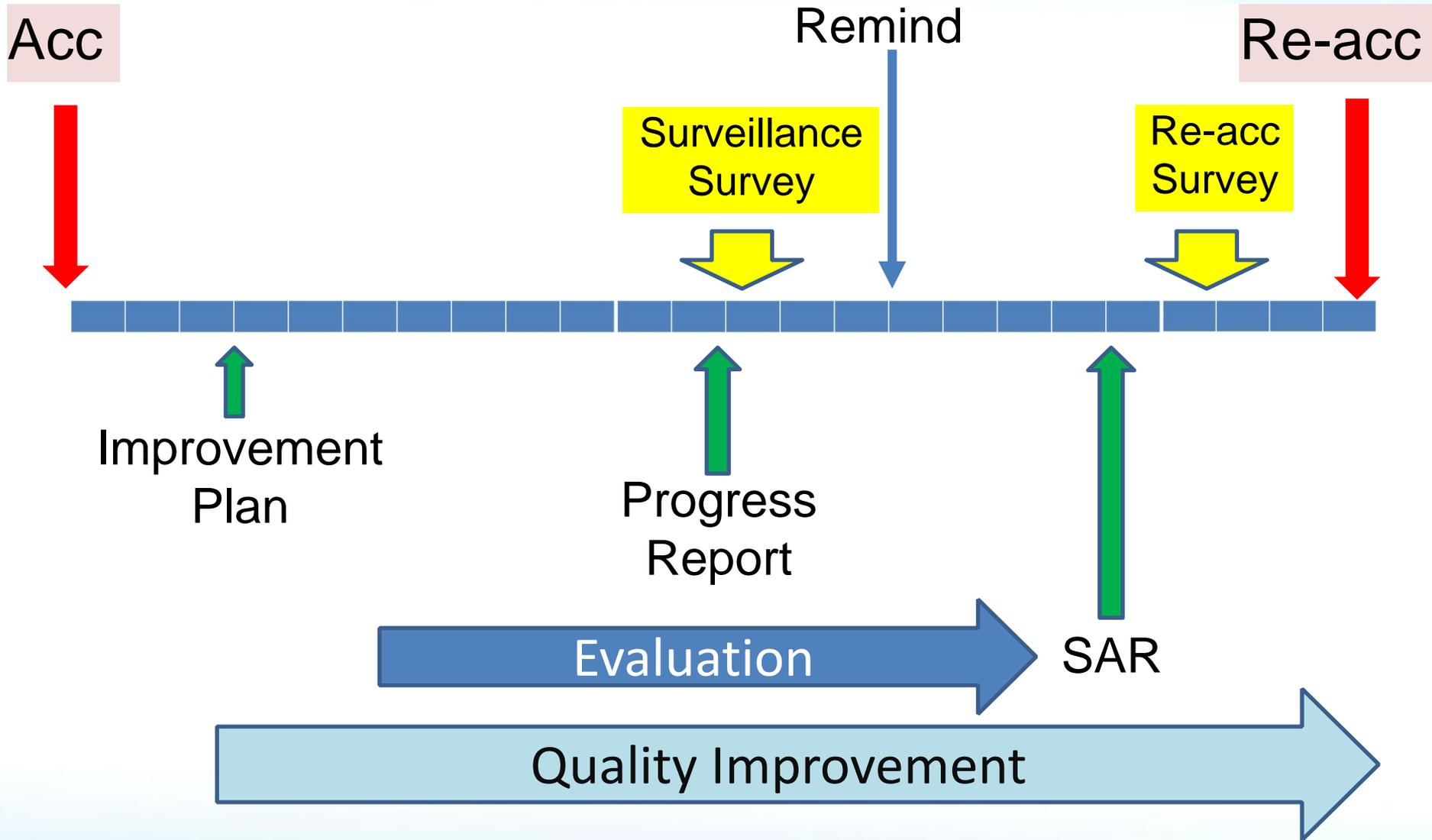
# Self-assessment Tools



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- **To find opportunities for improvement**
  - Work process analysis
  - Listen to patient experience
  - Evidence/criteria practice gap
  - Value stream mapping
  - Patient care review & medical record review
  - Tracer (go & see the reality)
- **To monitor progress and achievement of improvement**
  - Indicator monitoring
  - Internal survey
  - Scoring guideline
- **To identify challenged goals**
  - Benchmarking
- **To support learning**
  - knowledge sharing (especially tacit knowledge)
  - group discussion & learning (for new topics)
  - dialogue/reflection (to understand oneself and others)
  - Presentation and discussion (for refinement or spread)
  - CQI stories
  - After Action Review
- **To support external evaluation**
  - Self-assessment of standard compliance

# During the 2-3 Year Cycle of Accreditation





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## 5. Performance measurement

# Performance Measurement

- Be patient to start with **assessing the process of using performance measurement** rather than assessing the level of performance
- **Avoid the pitfall** of performance measurement
  - Pitfall of measuring for the boss or for judgment
  - Should be used for improvement by the people doing the work
- **Allow flexibility**
  - A set of minimal indicators that everyone should use
  - Options of indicators that can be used
- **Comparison**
  - Start with comparison at the local level
  - Support for the poor, not giving a stick
- **Analysis & interpretation**
  - Need assistance

# Focus on Performance

Score	Process	Result
1	Design & early implementation	Measure
2	Partial implementation	Valid measures
3	Effective implementation	Get use of measures
4	Continuous improvement	Good results (better than average)
5	Role model, good practices	Very good results (top quartile)

Advanced HA  
focus on outcome

Patient Care Results  
Patient Focused Results  
Financial Results  
Human Resource Results  
Process Effectiveness Results  
Leadership Results  
Health Promotion Results

Comparative Hospital  
Indicator Project

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

Self-determined KPI





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## 6. HA can do more than recognition

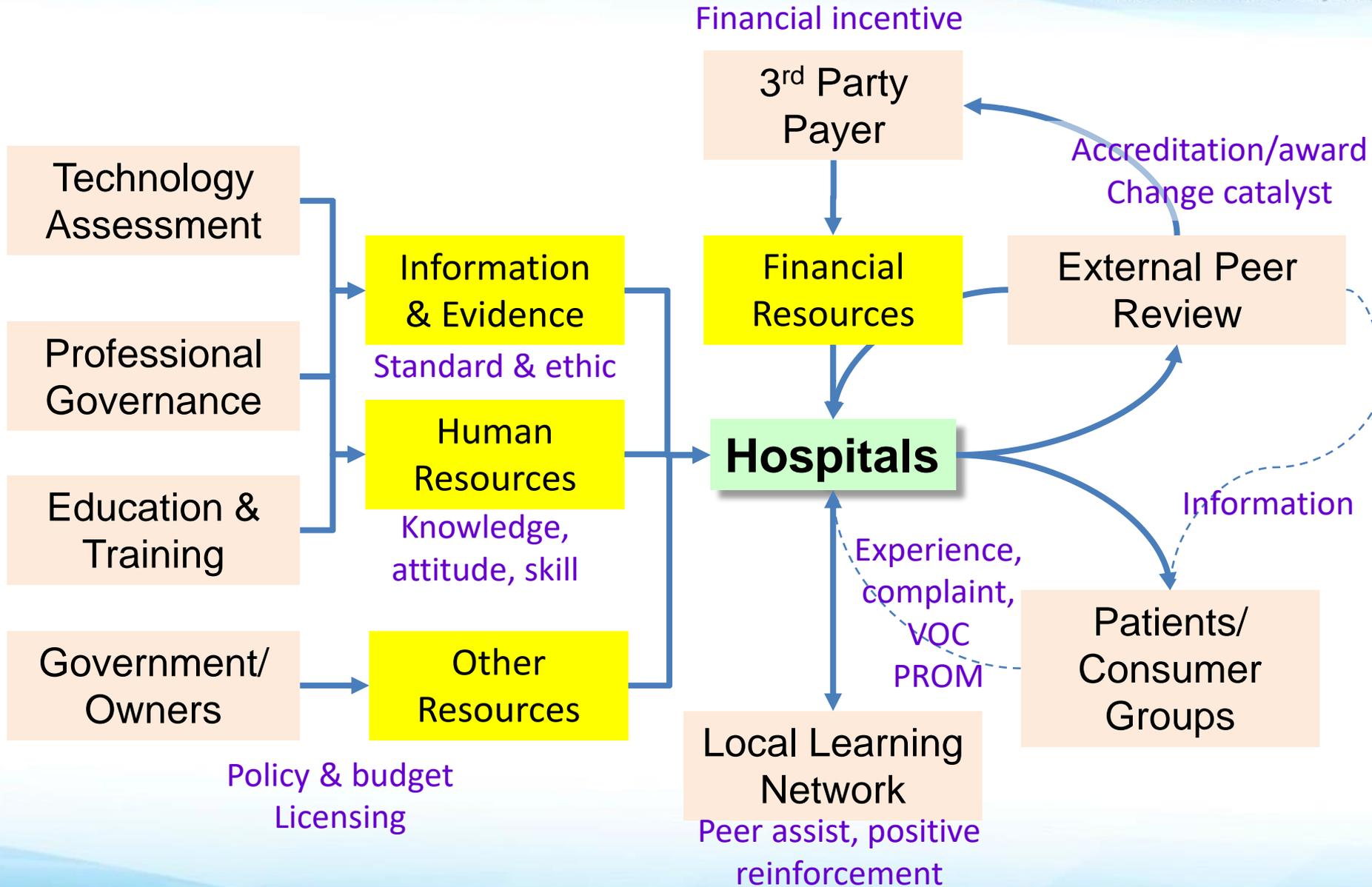
# Not Only Recognition, HA Can Do More

- **Quality tools** advocate
  - Performance review, Trigger Tools
  - RCA & FMEA
  - PDSA
- **Training** for quality improvement
- Introduce **new concepts & tools** of quality improvement
  - Through HA National Forum
  - Comparative indicators
  - National Patient Safety Goals
- **Local peer assistance** promotion
  - Quality Learning Network
  - HA Collaborating Center
- Collaboration with **stakeholders**
  - Professional organizations: e.g. quality of surgical care initiatives, lab accreditation, hospital pharmaceutical standards
  - WHO Patient Safety Curriculum
  - Patient advocates

# HA as a part of the Whole System



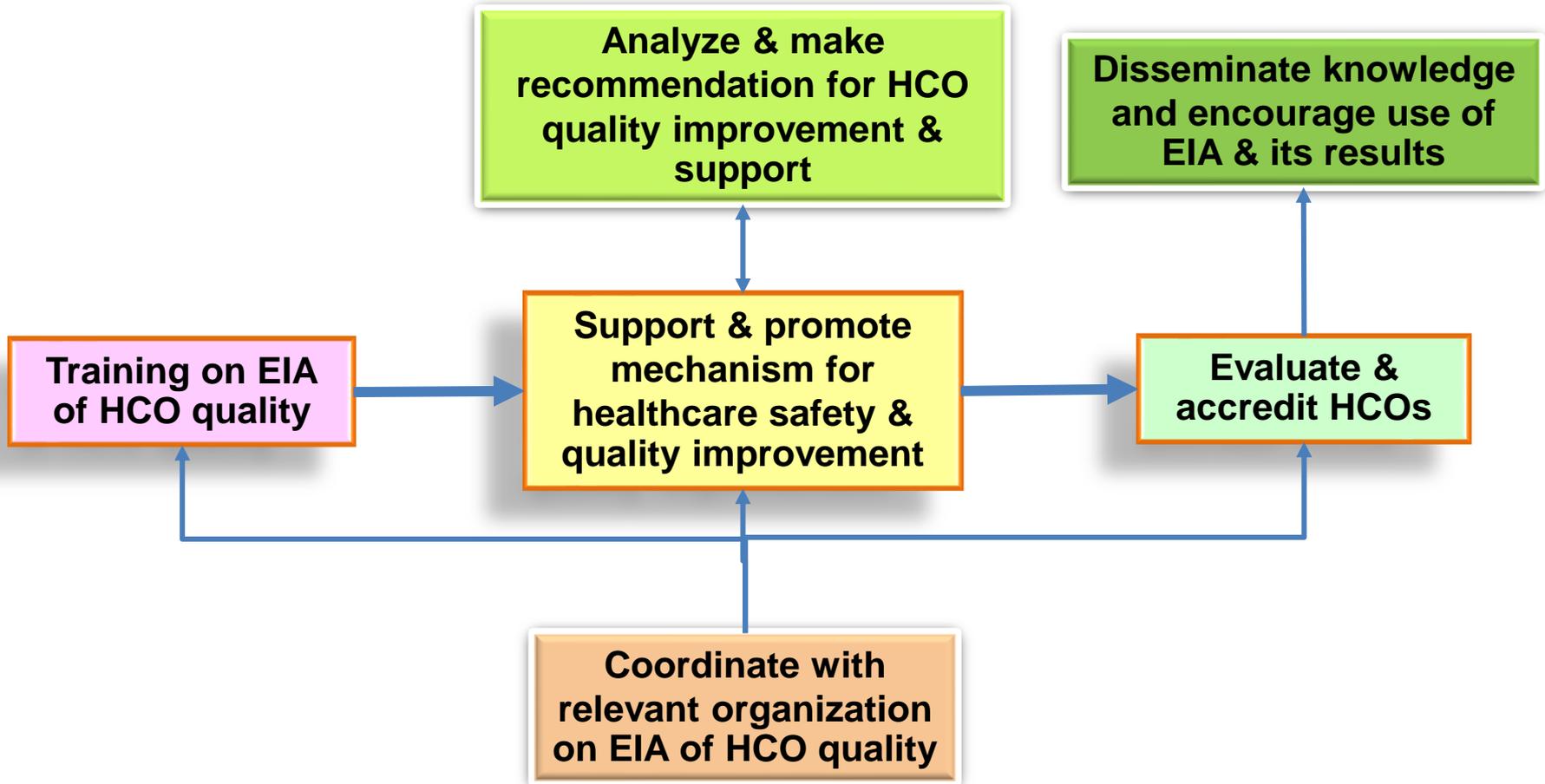
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# The Accreditation Organization

- **Trust & impartiality**
  - Need time to proof
  - A mechanism to ensure **transparent decision**
  - Back up with **ethical principle** & code of conduct
  - Role model, **intrinsic motivation**
- **Need to be efficient**
  - Simple processes
  - Collaboration & volunteer spirit
  - Not look for perfection
- **Financial sustainability**
  - Level of public funding depends on the economic status of the country
- **Can be any form**
  - A unit under the MOPH
  - An autonomous government agency
  - A private organization

# Example Functions of the HA Institute



**EIA**=Evaluation, Improvement, & Accreditation  
**HCO**=Healthcare Organization



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## 7. Suggestion in starting HA

# Suggestions in Starting HA

- **Emphasis on improvement** for the desired quality
- Avoid words that will create **negative feeling**
- Understand **adaptive challenge** and avoid using superficial technical solution
- Not aim for perfection, **but minimal effort** for great impact
- Use modern model of evaluation, aim at outcome & give freedom for improvement
- Use multiple methods to **acknowledge** improvement
- Encourage **measurement for improvement**, not for judgment
- Use **local learning network** to support and spread



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Thank  
You