



Quality Improvement Journey of Hospitals in Thailand

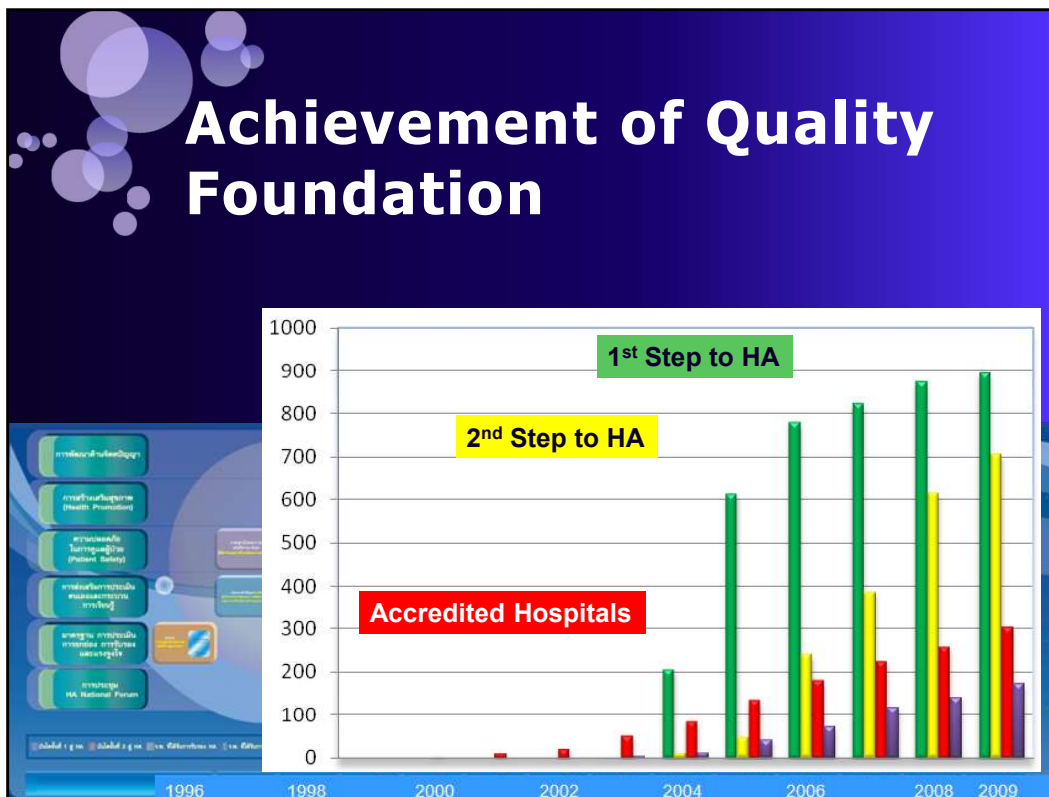
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Accreditation Institute, Thailand

Good evening ladies and gentlemen,

I would like to thank the 3M that arrange this prestigious dinner and also the valuable workshop for this whole week.

It's an honor for me to present to you the quality improvement journey of hospitals in Thailand during the past 15 years.



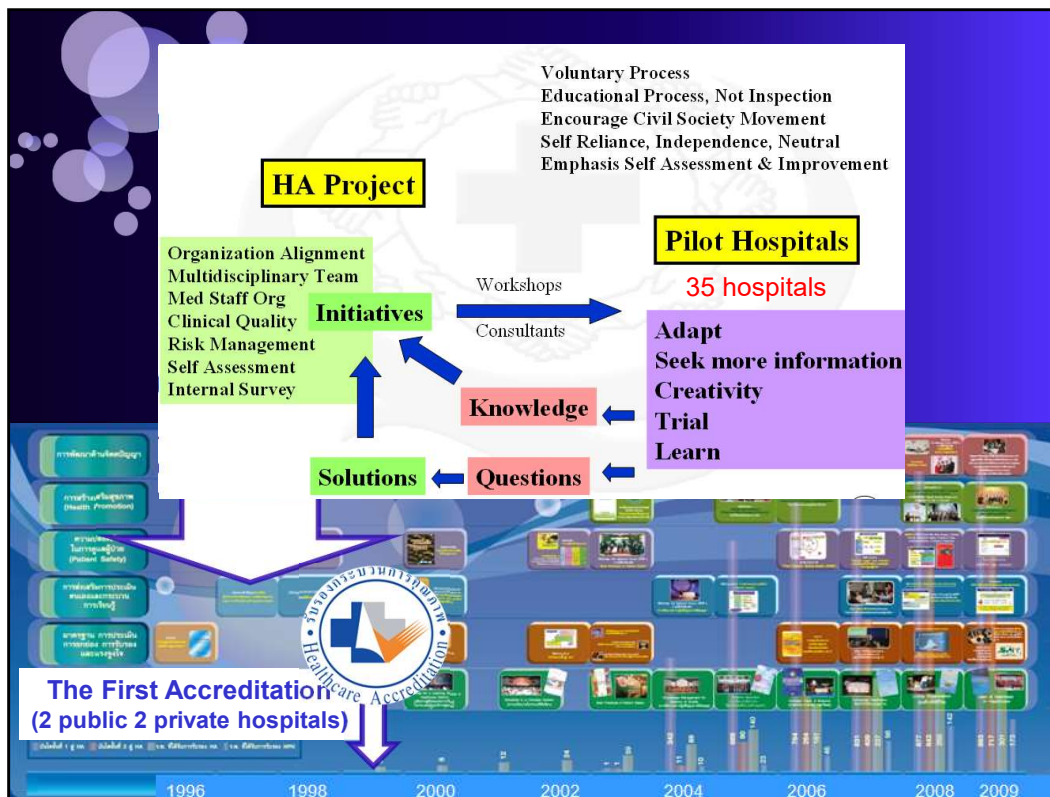
Let's start from the results. 300 hospitals out of 1400 hospitals have been accredited by our national Hospital Accreditation Program.

The Hospital Accreditation Institute , or HAI Thailand, has a mission to promote quality improvement for all hospitals using self assessment and self improvement together with external evaluation and recognition as an incentive.

We learnt the power of recognition from the HA program. Hospitals are willing to open their house. There is high level of collaboration. It's a positive reinforcement. It's more effective and more friendly than top-down policy. Later on, many of the division in the Ministry of Health ask the HA program to put their agenda into the standards and the survey process. No one want to stay behind. It demonstrates that something we think it's impossible may become true.



We launched the first hospital standards in 1996 after 3 years of implementing Total Quality Management in some public hospitals and reviewing standards from various countries. The standard is a framework for trial and development by pilot hospitals, like a new house that wait for interior design by the hospital staff.

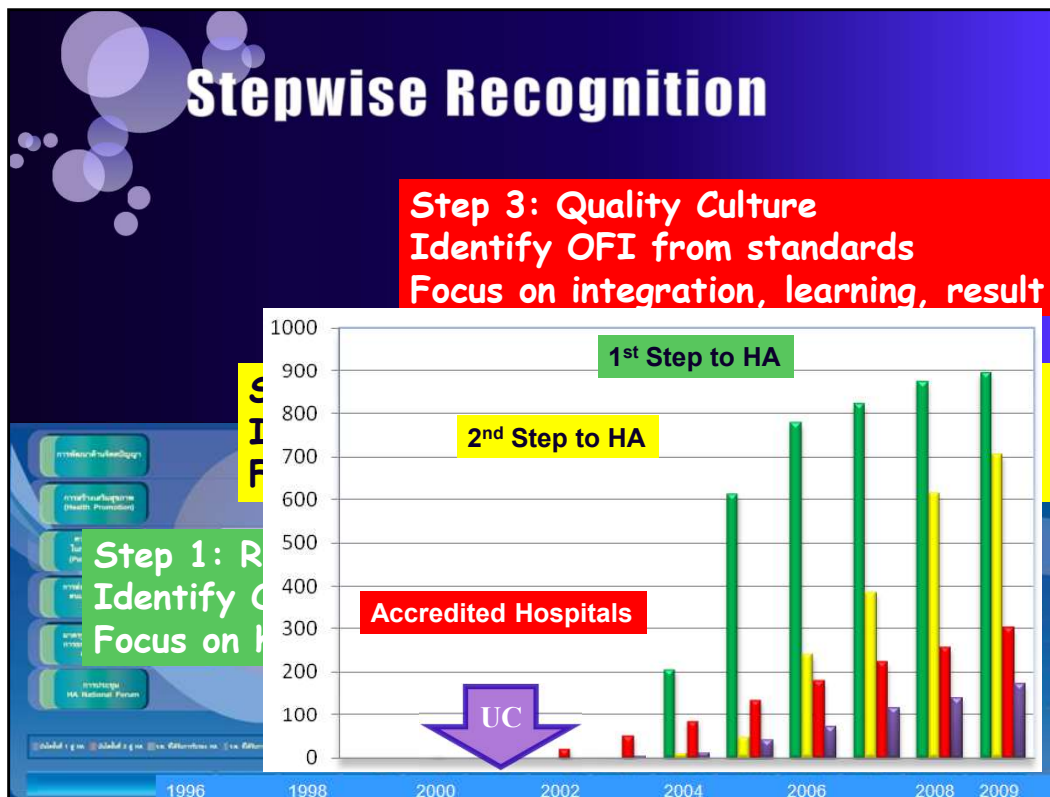


The first accreditation decision was made in 1999 for 4 hospitals. What had we done with the 35 pilot hospitals during that period of time?

As a research and development project of a field trial, a series of concepts and tools had been gradually introduced under the framework of the HA Standards, e.g. multidisciplinary team, medical staff organization, clinical quality improvement, risk management, quality review, internal survey, and etc.

The hospitals were volunteer to join the project, they had a high degree of freedom to test their idea and lessons their heard from the others.

The result is that the participated hospitals gained potential to be learning organizations and it's a good platform for any policies or innovative changes.



With the introduction of the government's universal coverage policy in 2001, the HA program had to adapt itself to match the need of broader access to quality care. The stepwise recognition program was started to assist hospitals with limited resources comparing to their workload to be able to get along with the quality journey.

The first step to HA emphasis quality review activities to identify opportunities for improvement and risk prevention. The second step to HA emphasizes quality assurance and quality improvement to fulfill purpose of the hospital and its units. The third step is a full hospital accreditation program that emphasizes compliance to HA standards in a learning mode.

As a result of this approach, more hospitals can achieve their success gradually.



Through the annual conference, HA National Forum, the HA program shine the path to the prospect of hospital quality improvement and forum for experience sharing with 7,000 participants this year.

The theme of the forum reflect our concern, our hope, and also input from international society. The 8th and 9th National Forum on Humanized Healthcare and Living Organization gave a new direction to our movement.

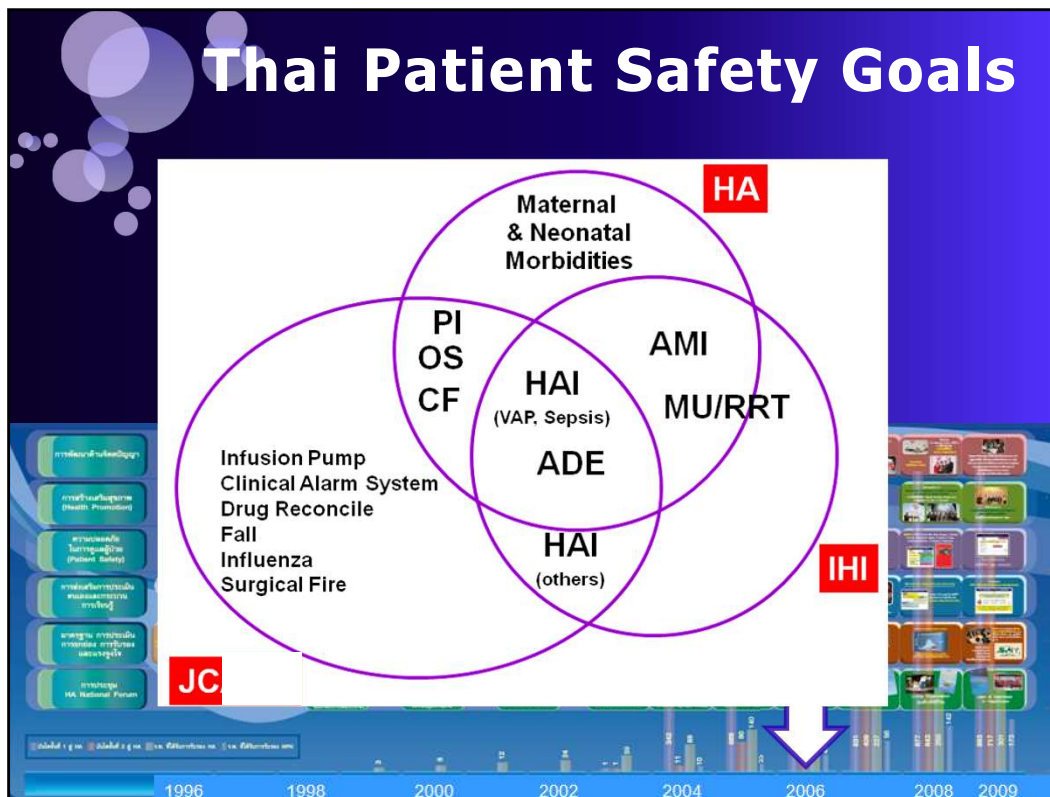


We believe in the power of integration. During the HA program implementation, hospitals are also encouraged to pay attention to health promotion by the Ministry of Health and by the Health Promotion Foundation.

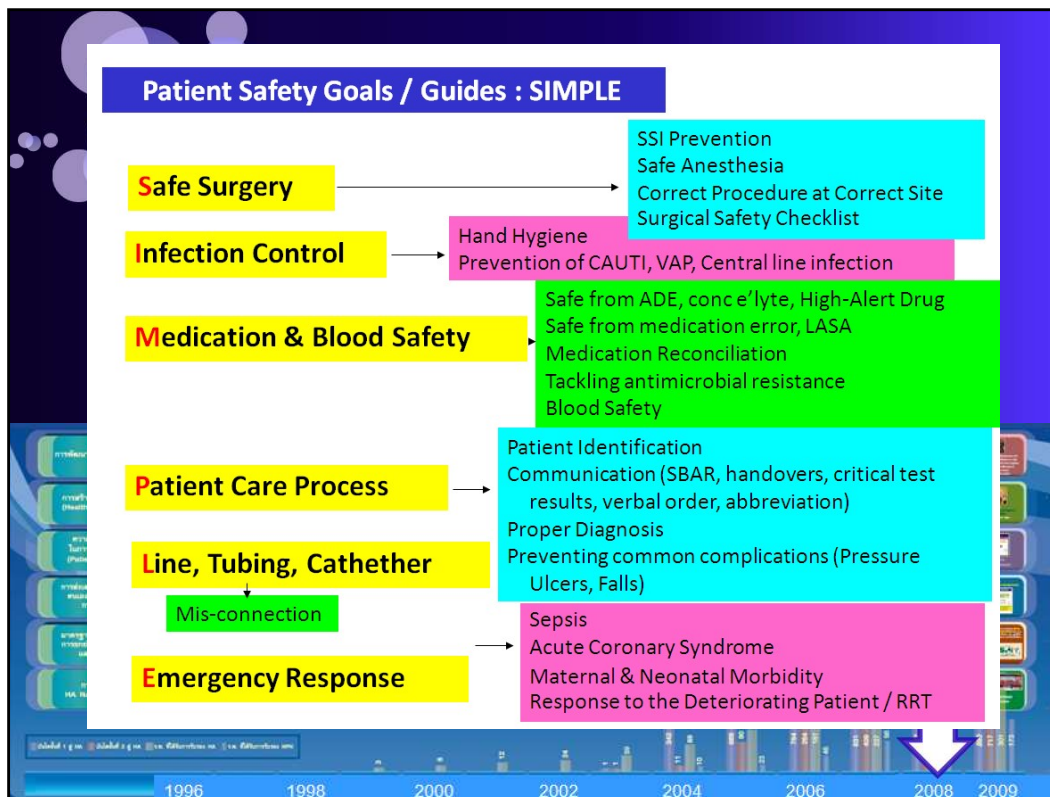
At the same time, the Thailand National Quality Award Program has been very attractive to many high performance hospitals.

In 2004, we started drafting a new hospital standards, combining key concepts of patient safety and quality from HA, focus on health and empowerment from HPH, and learning and integration from TQA.

The Standards was launched in 2006 and has been accredited by the International Society for Quality in Healthcare (ISQua) this year.



Thai patient safety goals has been set up since 2006 to guide hospitals on key areas to pay attention. Various guidelines, including WHO Patient Safety Solutions, JC Patient Safety Goals, and IHI Campaigns are studied and we select 9 issues as the first set of patient safety goals.



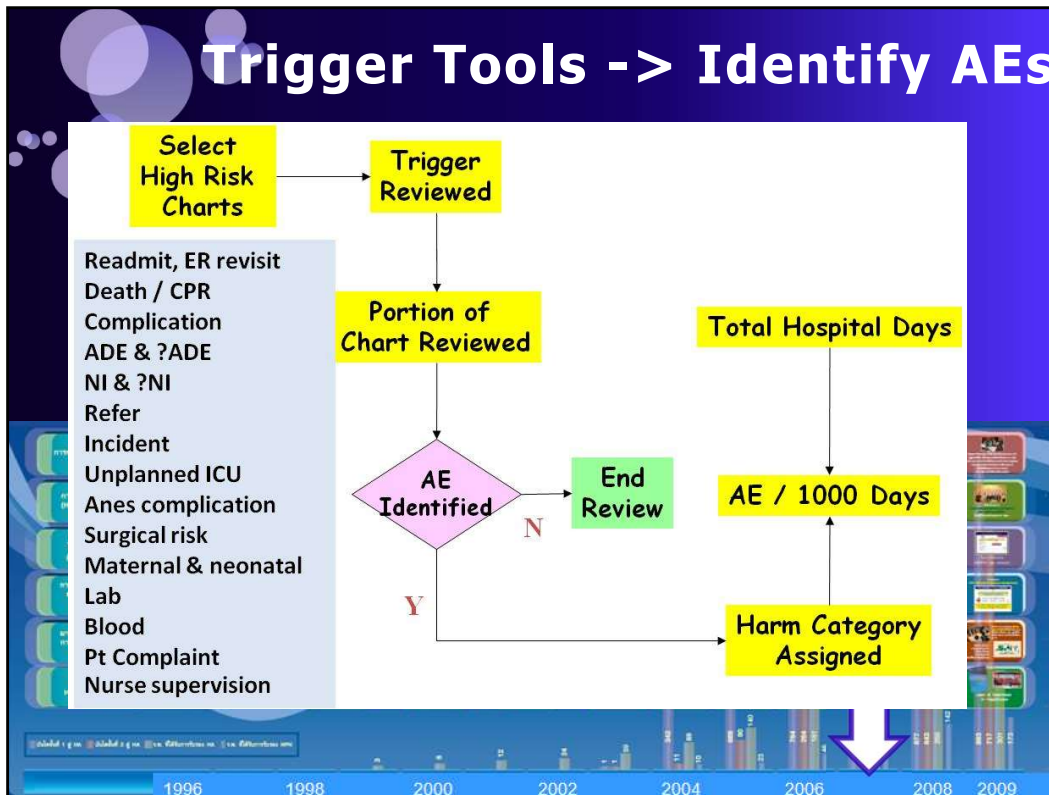
In 2008, they were grouped together under the heading of SIMPLE (safe surgery, infection control, medication & blood safety, patient care process, line/tube/catheter, emergency response) for ease of campaign. SIMPLE is now being promoted as a **guide** for tracing strengths and opportunities for improvement.

They cover the first 2 global patient safety challenge proposed by the WHO, and lately the 3rd one was added.

The collaboration of 3M and JCR assist us a lot to move forward on prevention of surgical site infection as a comprehensive approach.

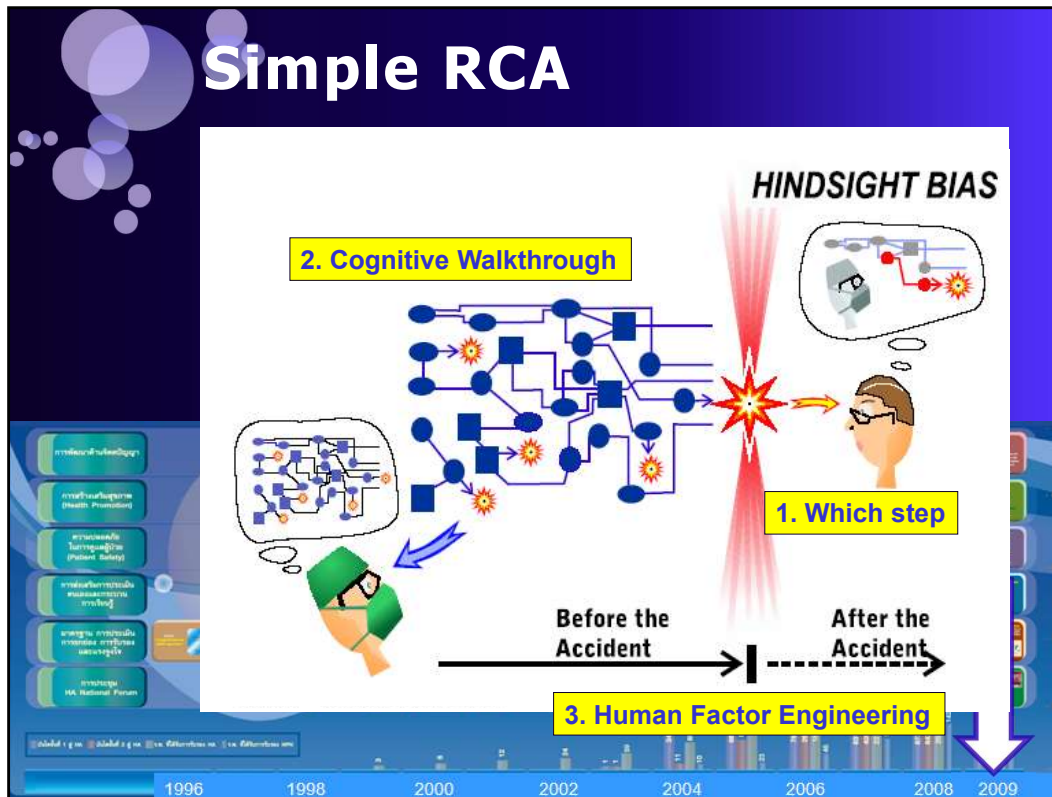
We promote hospital staff to use gap analysis and tracer methodology to identify opportunity for improvement using all evidences and guidelines available.

Trigger Tools -> Identify AEs



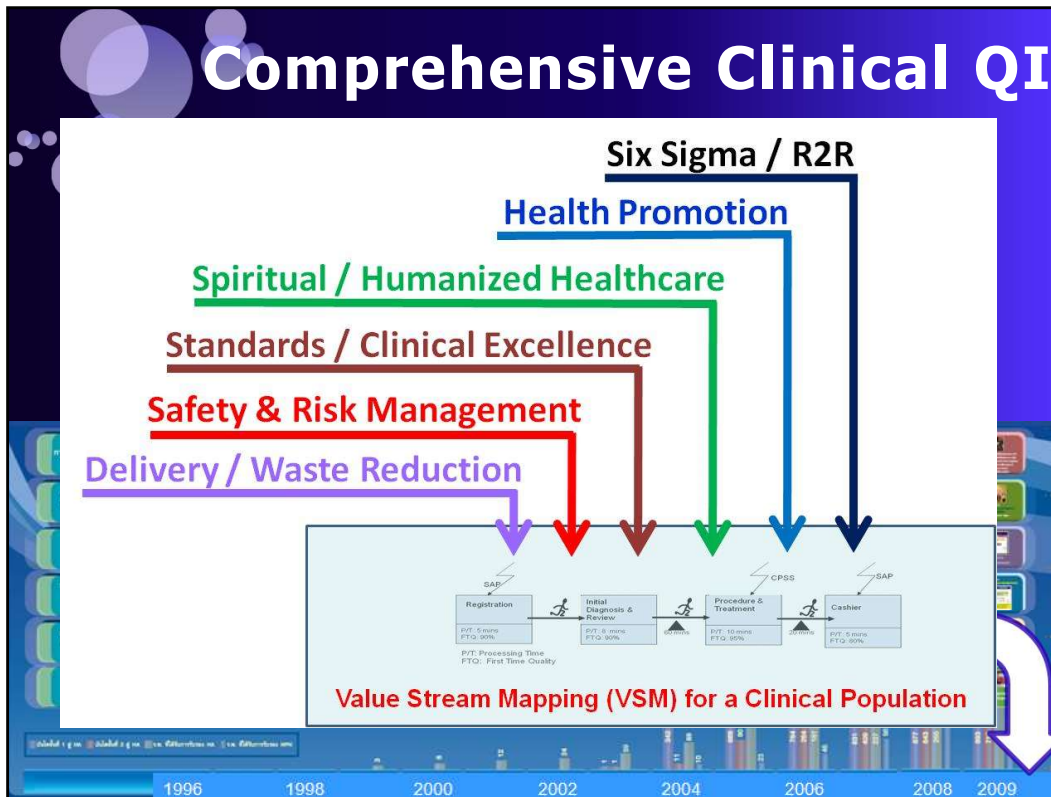
Furthermore, a methodology of trigger tool has been developed to enable hospital to identify serious adverse events that are often under-reported. Our approach is different from the IHI approach that we use triggers as criteria to screen medical records for reviewing and we emphasis on learning from the events rather than the trying to make an accurate calculation of adverse event rate.

Simple RCA

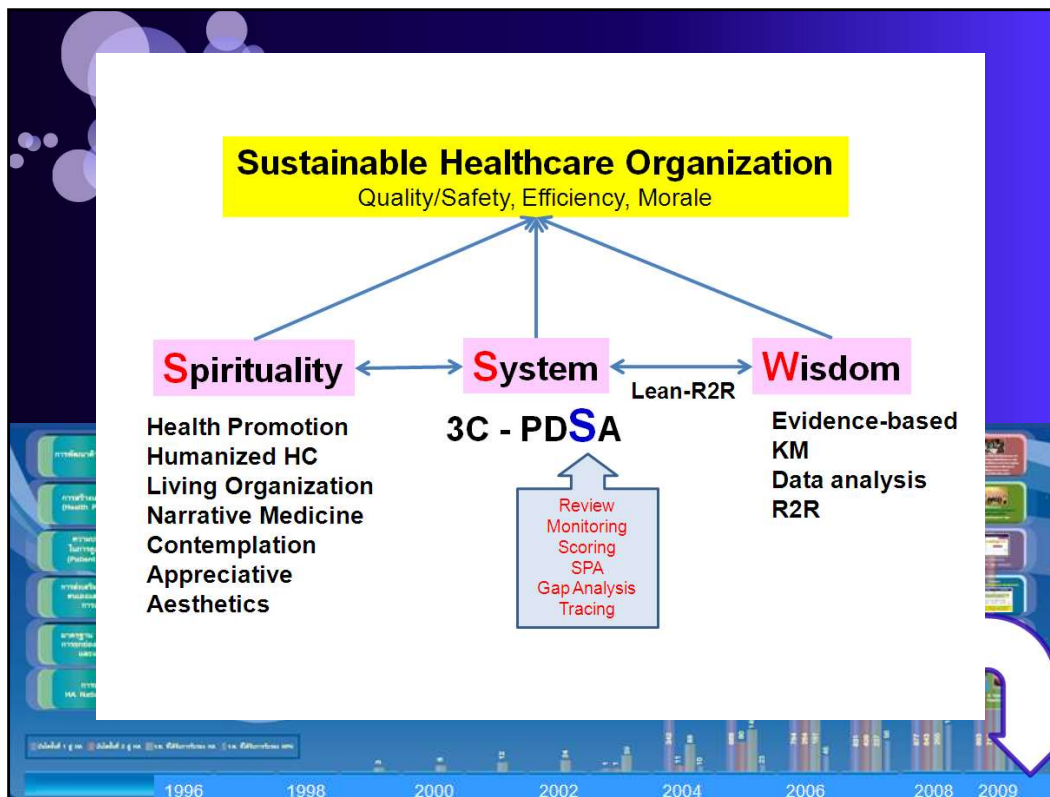


We simplify the method for root cause analysis using the advantage of hindsight bias to identify the steps or process for potential improvement or change of decision, balanced by information from those practicing in the real situation, and then use the concept of human factor engineering to create the best solution.

Comprehensive Clinical QI



We promote a comprehensive approach for clinical quality improvement, as a result of implementing lean concept in some hospitals. We realize the potential of using a value stream mapping or key process flowchart of any clinical population as a platform for clinical quality improvement. The approaches that can be combined together at the same time or sequentially are waste reduction, risk prevention, evidence-based, spirituality, healthcare, and also six sigma or routine to research.



The theme of the HA National Forum this year is “Flexible and Sustainable Development”. It’s an opportunity for us to review the concept of sustainability and realize the virtue of eastern philosophy “trisikkha” or three domain of development. Comparing sil, smadhi, panya with quality system, spirituality and knowledge or wisdom.

The spirituality approach promotes a higher level of performance without an aim to evaluate, but to open form for sharing and appreciation.

Humanized healthcare promotes caring patient with love of human heart, a similar concept to people-centered care encouraged by the WPRO and SEARO.

Living organization promotes the application of spirituality at the workplace, a positive approach to people relationship and to get use of the very high potential of mankind.

**With limited resources
We will do our best.**

Thank you for
your attention